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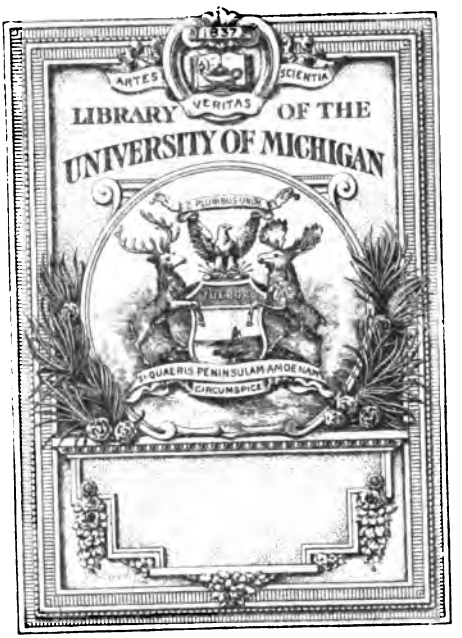
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THE

SPECIAL THERAPEUTICS

OF

THE NEW REMEDIES.

THE

SPECIAL THERAPEUTICS

OF

THE NEW REMEDIES.

MATERIA MEDICA

AND

SPECIAL THERAPEUTICS

OF THE

NEW REMEDIES.

BY EDWIN M. HALE, M.D.,

LATE PROFESSOR OF MATERIA MEDICA AND THERAPEUTICS OF THE NEW REMEDIES IN HAHNEMANN MEDICAL COLLEGE, CHICAGO; PROFESSOR OF MATERIA MEDICA IN THE CHICAGO HOMŒOPATHIC COLLEGE; AUTHOR OF "LECTURES ON DISEASES OF THE HEART," "CHARACTERISTICS OF NEW REMEDIES," "DISEASES OF WOMEN," ETC.

FIFTH EDITION—REVISED AND ENLARGED.

(THIRTY-SEVEN NEW REMEDIES.)

IN TWO VOLUMES.

VOL. II.

SPECIAL THERAPEUTICS,

WITH ILLUSTRATIVE CLINICAL CASES.

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To

DR. RICHARD HUGHES,

OF ENGLAND,

AUTHOR OF THE MANUALS OF PHARMACODYNAMICS

AND THERAPEUTICS,

This Volume

IS RESPECTFULLY DEDICATED BY

THE AUTHOR.

. . . "TOUCHING the open questions of medical opinion and practice—while each of us proclaims the opinions he has espoused, and zealously puts them in practice, let us cultivate the catholic and noble spirit of Chillingworth: 'I will take no man's liberty of judgment from him, nor shall any man take mine from me, and what measure I mete out to others, I expect from them again.'"—CARROLL DUNHAM, *Address before the American Institute of Homœopathy*, 1870.

"SOME people suppose that a physician, professing belief in the homœopathic law, is obliged to limit his practice strictly to the application of that law. He is not to administer a purgative, or to give an opiate, or to prescribe Quinine, or to recommend a mineral water, under any circumstances, without in some way incurring the suspicion of sailing under false colors, of having deserted his creed and betrayed his principles. To those who cannot rise above the mere partisan spirit of cliques and schools, this may seem to be a righteous judgment. The man, however, who is loyal only to nature and to truth, regards such restrictions as sheer impertinence, and claims everything which *cures*, be the process explainable or not, as inalienably his own. He is astonished at the blindness and bigotry of the old school, who permit the grandest treasures of the curative art to lie unrecognized before them. He sets them a nobler example. He cultivates assiduously his own special field of science, but if he finds any residuum of truth or usefulness in allopathy, or any other system, he asks no man's permission to use it; but acknowledging its source, appropriates it by divine right as the legitimate property of every healer of the sick."—WM. H. HOLCOMBE, *Address before the Hahnemann Medical Society of Cincinnati*, 1875.

PREFACE TO FIFTH EDITION.

THAT a fifth edition of this volume is called for is good proof that the Homœopathic School is not satisfied to be confined to the old remedies, valuable and indispensable as they are.

Of the thirty-seven new medicines added to this volume, *eighteen* are indigenous to the United States, and three to the islands of the Pacific.

That many of them have not been proved is no reason why we should not use them, for the clinical experience is sufficient until we have their pathogeneses.

In addition to these following named new drugs I have added copiously to many of the medicines included in the previous edition :

Alstonia constricta,	Grindelia robusta,
Antimonium iodatum,	Hydrobromic acid,
Arseniate of antimony,	Iridin,
Arseniate of strychnia,	Kumyss,
Arum dracontium,	Melilotus,
Arum arseniosum,	Mercurius iod. cum kali iod.,
Auri et sodii chloridum,	Penthorum sedoides,
Benzoate of lithia,	Phoradendron,
Berberis aquifolium,	Pilocarpus primatus,
Brachyglottis repens,	Piper methysticum,
Bromide of ethyl,	Polymnia uvedalia,
Bromide of nickel,	Picrate of ammonia,
Bromide of zinc,	Quebracha,
Calcarea iodata,	Rhus aromatica,
Eryodycton,	Salicylic acid,
Eucalyptus,	Salicylate of soda,
Euonymin,	Sanguinarina, nitrate of,
Fucus vesiculosus,	Thymol,
Gentiana quinqueflora,	Turnera aphrodisiaca,

Weythia helenoides.

If the medical profession receive this edition with the same cordiality as the previous ones, I shall feel amply repaid for my labors.

EDWIN M. HALE.

CHICAGO, January, 1880.

PREFACE TO FOURTH EDITION.

THIS volume contains my own personal experience in the therapeutical use of the New Remedies, together with the clinical experience of physicians belonging to the homœopathic and other schools of medicine. With some remedies this experience extends over a period of more than twenty years; with others a briefer time; a few of the medicines I have not used. In quoting the clinical experience of others I have tried to give all the authorities as far as attainable. I have not intended to show any preferences, for I believe in tolerating the largest liberty of opinion and practice.

When the First Volume was in course of preparation, a few of my colleagues suggested that I should pursue the plan adopted in the first two editions, namely: giving the day-books of the provers, and the authority for each symptom. After due consideration and consultation it was decided that such a plan was not necessary or desirable. The scope and purpose of the volume did not require it, for it was not intended as a *general*, but a *special* Symptomatology. In this volume, in my mention of each remedy, I have generally given its pathogenetic history, names of provers, etc. Moreover, Allen's *Encyclopedia of Materia Medica* now finished, renders the citing of every authority altogether superfluous. Those who have any desire to ascertain the paternity, or investigate the original sources of my pathogenetic characteristic symptoms, are respectfully referred to the above-mentioned work, wherein they are generally given with much accuracy. The few instances where I have appended the names of physicians to symptoms in Vol. I were inadvertencies; for it was not my intention to give any authority, except for some peculiar curative symptom, or indication, or for some very recent proving. I trust this explanation will serve as sufficient apology for any apparent omission or neglect in acknowledging my indebtedness to the many authorities from whom I have drawn.

In this volume I have tried to explain the Law of Dose, based on the primary and secondary action of drugs, and have given some illustrations which appear to prove its truth. I expect it will meet with that persistent opposition and severe criticism, which greets every discovery or new principle; but my convictions are strong that when accepted and adopted it will prove of incalculable value in the advancement of our school of practice, and to the Art of Healing.

EDWIN M. HALE.

CHICAGO, July, 1875.

HOW TO USE THESE VOLUMES.

IT will be seen by the reader that these volumes complement each other. The student or practitioner should have them both before him, and in the study of any particular medicine or disease, constant reference from the Symptomatology of a remedy to its Special Therapeutics will be necessary. The copious Therapeutical Index to this volume, it is to be hoped, will prove a valuable aid.

THERAPEUTICS

OF THE

NEW REMEDIES.

ABIES CANADENSIS.

THE use of the Hemlock Spruce for *dyspepsia* is empirical, and originated in domestic practice. A tincture of the buds made by maceration in whiskey is said to have cured the following symptoms:

A light-headed feeling, attended with a gnawing, hungry, faint feeling at the epigastrium, craving hunger, which, if gratified, was followed by distension of the stomach and hard beating of the heart.

The condition represented by the above symptoms resembles that observed in *catarrh of the stomach.* Drs. Gatchell and Beckwith claim to have cured many cases having the above symptoms, with the tincture. A tincture of the gum of the Abies nigra has caused and cured somewhat similar symptoms.—See Allen's "Encyclopedia of Materia Medica," vol. i.

ACALYPHA INDICA.

Ainslie, in his "Materia Medica Indica," says the Indian (Tamool) name for this plant is *Koopamanie,* and observes that the *Hakeems* (native physicians) prescribe it in consumption. Dr. Tonnere, of Calcutta, claims to have cured some pulmonary symptoms, viz.:

Dry cough, followed by spitting of blood. He, as well as Drs. Thomas and Holcombe, asserts that it will arrest *hæmoptysis* after all other remedies fail. It is indicated in expectoration of pure blood in the morning, and dark lumps of clotted blood in the evening. It cures this kind of hæmorrhage, but not when caused by tuberculosis of the lungs.

ÆSCULUS HIPPOCASTANUM.

This is a veritable polycrest, having a wide range of action, but, like some other polycrests, it has a central point of action from which radiate a series of reflex symptoms. This central point of action is the *liver and the portal system*, and nine out of every ten of its symptoms are due to this action. I have found it analogous in its effects to Aloes, Collinsonia, Nux vomica, Sulphur, and Podophyllum. It is not as poisonous as the Buckeye, its indigenous relative, for the nut is used in Europe to fatten animals, and they are often eaten with impunity by children; the meat of the seeds is sweet when boiled, but the rind is bitter. I think the tincture should be prepared from equal parts of the nut-meat, rind of the nut, and the bark of the tree or its root. In this way we shall be sure to get all its active medicinal principles.

In my practice I have been most successful with it in the following disorders:

Congestion of the liver, when accompanied by *piles*. It is indicated by the symptoms: aching, pinching pains in the right hypochondrium, aggravated by walking. The pain extends up between the shoulders.

Constipation, when there is present a hard, knotty, dry condition of the stools, which are *white*. (If the stools are black, or dark, or brown, knotty, and hard, I prefer Nux vomica.)

Hæmorrhoids, if the following symptoms are present, are promptly removed by Æsculus. (It will not prove a successful routine remedy, but must be closely affiiliated.) The tumors are protruding, or internal, are usually purple, hard, and very sore (not *raw*, as in Aloes, but a *bruised feeling*), with aching, burning, *rarely bleeding*. The rectal symptoms are characteristic, and consist of very disagreeable sensations of dryness, soreness, constric-

tion, fulness, and a feeling as if sticks, splinters, gravel, or other foreign, irritating substances had become lodged in the rectum. We find also a feeling of fulness with protrusion, and a desire to strain (tenesmus). A characteristic condition is usually present, which differentiates between this medicine and other pile remedies, namely, the *absence of actual constipation*. In nearly every case the stools are too frequent, and soft, sometimes quite loose, pale, or dark, and rarely, if ever, large, dry, or scybalous. In this respect it resembles *Aloes*. I do not agree with Dr. Hughes, when he says, "when the only connected symptoms or appreciable cause is constipation, Æsculus is indicated;" for I believe its action on the portal system is the primary cause of its hæmorrhoidal symptoms; but I *do* agree with him in his belief that "when there is much pain, but little bleeding, Æsculus seems pretty likely to cure."

My experience with Æsculus has been verified by the majority of physicians, so that it may claim a high position as a remedy in diseases of the *rectum*. The *pains in the back* which attend its rectal symptoms are quite notable. They are sometimes shooting or cutting, but usually consist of a lameness as if strained, extending to the hips or legs, or an aching and weakness aggravated by walking, stooping, or any movement. Like Rhus, its pain and stiffness often goes off after continued motion.

Dr. Guernsey advises it for a *backache occurring during pregnancy*, when the pain is in the sacro-iliac symphysis, and prevents walking, because "that part of her back gives out, compelling her to sit down." I have prescribed it with good results in slight cases of *fissure of the anus*, also in incipient *stricture of the rectum*. In *prolapsus ani* it compares favorably with Nitric acid, Podophyllum, and Mercury, which it resembles in its pathological action. Nux and Ignatia cause prolapsus in a different way, namely, by a secondary paralysis of the circular fibres of the intestinal and sphincter muscles. In some rare instances it will be found useful in *headache* when attended by constipation or piles. The pain is mostly confined to the occipital region, and is dull and pressing, or a bruised, stupefying aching with a sensation of heat. It has been recommended in *influenza*, and many of its

symptoms bear a strong resemblance to those caused by a cold affecting the nose and throat.

Dr. Buchmann says he cured with Æsculus a *chronic cough with emaciation.* The symptoms point to a laryngeal origin of the cough, and it may be found useful in catarrhal laryngitis, and possibly in some cases of cough of hepatic origin.

Dr. Meyhoffer, in his "Chronic Diseases of the Organs of Respiration," says: "Æsculus hippocastanum rendered us last winter great service in a case of pharyngo-laryngitis follicularis with considerable catarrhal inflammation of the lining of the throat and larynx, complicated with piles and the most obstinate costiveness of long standing; it not only restored the muscular contraction of the intestinal tube, but also greatly relieved the laryngeal irritation; cough and expectoration diminished speedily, and the signs of congestion in the affected parts diminished rapidly."

In several cases of *pain about the heart* in hæmorrhoidal subjects it seemed to be of decided benefit.

Dr. Neidhard says, "In a case of *curvature of the spine* the pains were entirely cured by Æsculus."

Its action on the venous system and mucous membranes is undoubted. If it acts on the spinal cord, it is but slightly, and not as intensely as the Buckeye. The lower attenuations have usually been prescribed. The triturations of the nut-meat (albumen) is generally used, but, as before stated, I prefer a tincture of the various portions. Since writing the above, I observed a paper on this drug by Dr. Hart, of Wyoming, Ohio, who opposes Dr. Hughes's view of its action, and agrees with my opinion, namely, that the Æsculus h. is primarily homœopathic to portal and intra-abdominal congestions, and that the constipation is secondary. Dr. Hart claims to have discovered a keynote to the employment of this remedy in a symptom not found in its pathogenesis:

"*Throbbing in the abdominal and pelvic cavities;* especially the latter."

Hence, he says, it is especially indicated in all active intra-abdominal and pelvic congestions. I have prescribed it with invariable success in all cases of congestion and inflammation of the neck of the uterus, attended with the above-mentioned symptoms. Nor is it necessary to use the remedy very low. One drop of

Æsculus 6ˣ, three or four times a day, has cured, in my hands, the most inveterate cases of inflamed cervix uteri, when not complicated with ulceration; and has greatly relieved, and sometimes cured, similar cases attended with retroversion, prolapsus, ulceration, enlargement, and induration, when characterized by great tenderness, heat, and throbbing, as in the following cases:

Mrs. C., aged 22, a small, delicate blonde, had suffered during the last five years with congestive dysmenorrhœa. Eight months ago she was thrown from a carriage, since which time she has been under both allopathic and homœopathic treatment for retroversion and prolapsus of the uterus. Growing worse under the treatment to which she was subjected at Denver City, she was brought to me for advice with the following result:

Sept. 8.—Semi-paralyzed condition of the right lower extremity; muscles sore and contracted; has to be carried, being totally unable to walk; great weakness and emaciation; pulse 110, irregular and very weak; face flushed and eyes sparkling; bowels obstinately constipated; occasional nausea and vomiting; skin hot and dry; patient complains of great weakness and pain in the back, cephalalgia, and constant throbbing behind the pubes. A digital vaginal examination shows retroversion and enlargement of the fundus, with great tenderness, heat, and swelling of the cervix uteri, the vessels of which pulsate with great violence.

Ordered the patient to lie constantly on the face and left side; to use cold vaginal injections three times a day, and to take *Æsculus* 6ˣ, one globule every two hours, until the throbbing ceases, after which it is to be taken only twice a day.

Sept. 12.—Throbbing ceased. Continued treatment.

Oct. 1.—Patient greatly improved, and able to walk.

Nov. 1.—Patient dismissed cured.

ÆSCULUS GLABRA.

This relative of the horse-chestnut has been neglected. It is doubtless a more powerful medicine than the latter, for the Buckeye cannot be eaten with safety by animals or men. From the meagre provings we have, it would seem to resemble Cocculus and Nux vomica. It has been found curative by Drs. Hill, P. H.

Hale, Douglass, and myself in *hæmorrhoids* with the following symptoms:

Very painful external tumors, dark purple, with constipation and vertigo; weakness of the sacrum and lower extremities.

It is said that carrying the nut in the pocket, or wearing it on the body, will cure piles. Many physicians assert this to be a fact. Why not? May not the curative principle be absorbed in sufficient quantity?

I would suggest its use in *cerebro-spinal meningitis*, when we have:

Wry neck, vertigo, vomiting, opisthotonos, tympanitis, with stupor or coma.

It has usually been prescribed in the first three triturations of the pulp of the ripe nut.

AILANTUS GLANDULOSA.

A careful study ot the pathogenetic and toxical effects of this drug cannot fail to convince one that it is a powerful blood-poison. When we compare drug-effects with diseases, we observe not only a similarity in symptoms, but a marked similarity in pathological effects. For example, the results of poisoning by Arsenic and Veratrum alb. compare closely with the toxic effects of cholera Asiatica. The ultimate effects of Ailantus correspond to that condition and type of disease known as *scarlatina maligna*. Belladonna does not correspond to this form of the malady, but to the ordinary scarlatina of Sydenham.

It is in the putrid, malignant, and typhoid varieties of scarlet fever that Ailantus is indicated, not only by the symptoms, but the pathological state of the blood and secretions. Like the poison of the above disease, its morbific effects involve the brain and cerebro-spinal centres, and destroy life in the same manner. The *eruption* is peculiar; it is dark, almost livid, irregular, patchy, of a violet hue, even scaly, covering the whole body, or delayed and irregular in its appearance. In some cases there are large maculæ or bullæ filled with dark-colored serum. It (the eruption) remains livid—it never takes on the genuine scarlet color. It sometimes takes the form of petechiæ. The *fever* is in-

tense, with pungent heat, a rapid small pulse, hardly to be counted, great thirst, delirium or coma, and heavy, hurried, irregular breathing.

The *head* is burning hot, with great pain, *eyes* sparkling, with delirium, or inflamed (conjunctivitis). The *nose* discharges a copious, thin, sanious fluid, which irritates the skin (Arum, Nit. ac., Ars.), or blood and pus; the *tongue* is of a livid hue, dry, parched, and cracked; the *throat* livid and swollen; *tonsils* studded with numerous, deep, angry-looking ulcerations, exuding a scanty fetid discharge; the pain when swallowing extends to the *ears*, and the teeth are covered with sordes. The *urine* is scanty, and voided unconsciously.

This is certainly a vivid picture of disease, but the Ailantus has in many instances, in my own practice, appeared to dissipate this malignant condition. Drs. P. P. Wells, Small, Chambers, and others have testified in its favor. Other physicians, however, have failed to get curative effects.

Besides this disease the Ailantus has proved curative in *congestion of the brain, purulent ophthalmia, conjunctivitis, ozæna, malignant ulcerated sore throat, tonsillitis with ulceration, and bronchitis*, with asthmatic oppression, cough oppressed, deep and painful, with muco-purulent expectoration, free in the morning, sticky and scanty during the day, excessive tenderness all over the lungs; feeling as if the air-cells were stuck together; inability to completely expand the lungs, crepitant râles; *cough* constant, dry, with oppressive, burning, and stitching-aching pains in the chest. As these conditions often occur during the progress of measles and small-pox, as well as scarlatina, this remedy will meet all the indications, not only in the latter disease, but all the *eruptive fevers*, when they are attended by the unfavorable symptoms above mentioned. In one case of *cerebro-spinal meningitis* I prescribed it with excellent results. The special symptom, in addition to the general condition, which led me to its selection, was "intolerable pain in the back of the neck, upper part of the back, and the right hip-joint." Some of the symptoms indicate that we shall find it useful in *malignant dysentery* and some varieties of *enteritis*.

Dr. Robert, a French surgeon, communicates a paper to the

"Archives of Naval Medicine," relating to the use, by the Chinese and Japanese physicians, of the bark of the root of Ailantus in *dysentery*. They use an infusion of the fresh bark, allowing the patient to drink it until it causes vomiting and fecal stools. Dr. Robert tested its value; he used a tincture of the dried roots and bark in small doses, and found it superior to Mercury, Ipecac., or any other drug. He states that the blood began to decrease in a few days, and improvement soon set in, and continued steadily to convalescence. When we remember that this disease was *tropical dysentery*, and that dysentery in that hot climate is a far more serious one than in ours, the value of the Ailantus must have been very decidedly shown or Dr. Robert would not have considered it worthy of mention.

ALETRIS FARINOSA.

This is a remedy which has considerable reputation among Western homœopathists, but as yet no proving has been made of it. The clinical indications for its use were all obtained originally from eclectic practice.

It has been a favorite remedy with me for many years for the peculiar *anæmic debility* of chlorotic girls and pregnant women. Given in the lower dilutions, alone or alternated with Ferrum, it will soon restore appetite, strength, and the waning vitality. If such cases are attended by

Dyspepsia, slow digestion and flatulence, the Aletris is very prominently indicated.

I believe that certain remedies have such a special affinity for the reproductive organs of women, and that the term "uterine tonic" is not inaptly applied. Among the old remedies we have Calcarea and Sepia, which act in such a manner.

Uterine atony, even to the extent of *suspension of the menses* or *sterility*, comes under the curative sphere of this medicine. There are no characteristic symptoms yet known which specially indicate this remedy, but the general condition of the patient has been a sure guide to me in its selection. I have used it successfully for *scanty, pale menses*, where there was general debility, emaciation, and impoverished blood. In the scanty menses of corpulent and plethoric women it is of no value.

Prolapsus uteri, ante- or *retroversion*, where the dislocations depend on weakness in general, or of the uterine ligaments, can be cured by the lower dilutions of Aletris.

Habitual abortion, or *sterility*, when caused by uterine irritability and weakness, is a condition for which the Aletris is almost a specific, if it is prescribed properly. It should be given during the few weeks before the expected miscarriage (three or four doses daily), and continued until the dreaded period has passed by several weeks, and its use resorted to, afterwards, upon the slightest appearance of threatening symptoms. It has been asserted on good authority, that the fresh root has caused abortion; if so, like Sabina, it is homœopathic to that accident. Several physicians have informed me that in cases even where *pains* and a show of blood had appeared, it has succeeded, aided by quiet and the recumbent posture, in warding off a miscarriage which seemed imminent. Dr. Silas Jones, of New York, says it is valuable during the first months of pregnancy, where there is *excessive nausea*, vomiting, faintness, giddiness, and pain in the hypogastrium. The tincture is intensely bitter and nauseous. In general, I prefer the 2^x dil., although in some cases I like the action of the 1^x dil. best.

ALNUS RUBRA.

Although a notice of this medicine appeared in all three editions of "New Remedies," we know of no provings or clinical reports. I have had no experience with it, but have observed several cures in cases of obstinate *chronic eruptions*, such as *impetigo*, *prurigo*, *herpes*, etc.

It is said to be particularly useful in cases where eruptions on the skin alternate with diseased conditions of mucous membranes.

Scrofulous enlargement of the glands, and even hæmaturia, have been, it is said, treated successfully with the Alnus. I am in doubt whether it is an "antipsoric" or not. The same may be said of the

ALSTONIA CONSTRICTA.

This remedy was introduced to our school by Dr. Augustus Cathcart, of Australia.

The Alstonia constricta belongs to the order of Apocyneæ. It

grows in the form of a tall shrub or tree, and is known by the name of "Bitter Bark." It is indigenous to the colonies of New South Wales and Queensland, being found in the interior in some of the "scrubs," and occasionally in the open forests. The portion used in medicine is the *bark*, which is thick, yellow, deeply fissured, and of an intense bitterness. A few of the shepherds in the interior have somehow or other (probably from accidentally finding out its bitterness, or by direction of the natives) discovered its use in fever and ague, and some of them, in addition to calling it the "Bitter Bark," call it "Native Quinine Bark," as they look upon it as possessing properties similar to those of Quinine. As a remedy for *fever and ague* they use it in decoction, so I was informed by an old up-country shepherd, who first made me acquainted with it.

"An esteemed friend in Queensland," says Dr. Cathcart, "has, at my request, carefully watched the effects of this drug upon 'beer topers'—those who had drank large quantities of a certain beer which had been adulterated with this bitter drug as a cheap substitute for the hop. From the effects which he observed, and from those produced in other persons whom I have prevailed upon to take large doses of this drug while in robust health as a 'proving,' and those produced in my own person, I have *abundantly satisfied myself* that, in *large doses*, its action is that of invariably *producing* great debility and general prostration, or low fever,—often also with diarrhœa,—and, when pushed sufficiently far, rigors, sweats (usually cold), and other symptoms resembling fever and ague.

"Taking the *large dose effects* as my guide, I have used this remedy with far greater success than China in convalescence from acute diseases of every kind, even to post-diphtheritic and *post-scarlatinal debility*, and the *debility following parturition, under-lactation, diarrhœa*, etc.

"In the great majority of all those *other* cases where China is indicated I have found the Alstonia a more efficacious and far more reliable remedy. This use of it would alone stamp it as an invaluable remedy in all countries where patients have already been overdosed with Quinine at some time or other by allopathic practitioners.

"In cases of *summer diarrhœa* (in this hot climate), where un-

digested food is passed, more especially, and even when tinged with blood, I have found it specific.

"I have used it in cases of *dysentery* with success, especially where I thought the attack was complicated with symptoms of *malarial poisoning*, or proceeded from drinking bad water, or swamp-water impregnated with decayed vegetable matter—a frequent source of dysentery. Indeed, I have found it such a specific for these cases that I am confident it will prove the best remedy yet introduced for *camp diarrhœa* and dysentery of soldiers, when proceeding from this cause.

"In simple *atonic dyspepsia*, with loss of appetite, etc., its action is very satisfactory.

"In fever and ague, and in low fevers, especially those following upon attacks of acute disease, its extraordinary powers are manifested. For these it will be found a more reliable remedy than Quinine, Berberinum, or Chinoidin; and, moreover, *not* being so liable to affect the head, it may be confidently regarded as a perfectly *safe antiperiodic* and also a *preventive* of ague.

"In carrying out and confirmatory of the rule of the dose which I have adopted, I find that it takes *comparatively* large (homœopathic) doses to cure fever and ague, a weak decoction being the most reliable form, perhaps, or even nauseous doses of the mother tincture. Other cases require from the mother tincture to the 2d decimal dilution, in from one to five-drop doses, according to the strength of the disease and the age and susceptibilty of the patient. Being of a very bitter and unpleasant taste to some people, the dose has to be diluted with plenty of water, and sometimes reduced for those patients who have a great repugnance to bitters of any kind.

"I make my mother tincture from the coarsely-powdered bark, using rectified spirits, in the proportion of one pint of spirits to two ounces of bark, and this tincture I invariably carry in my pocket-case."

Since Dr. Cathcart's notice was written, several physicians in the United States have used the *Alstonia* with good results in the class of cases mentioned by him. Dr. Grosvenor, of Chicago, and Dr. K——, of St. Louis, report favorably. A fragmentary proving has been made.

The bark of *Alstonia constricta*, F. v. M., contains an alkaloid, *Alstonin*, which may be obtained by treating the alcoholic extract with water and a little hydrochloric acid, adding to the filtered solution a small excess of ammonia, dissolving the separated flocks in ether, evaporating the ethereal solution, and purifying the remainder by dissolving again in dilute acid, and repeating the above process. Orange-yellow, brittle, pellucid mass of very bitter taste, melts below 100° C., and is carbonized in higher temperature; dissolves easily in alcohol, ether, and dilute acids, sparingly in water. All its solutions in the dilute state exhibit a strong blue fluorescence, which is not affected by acids or alkalies. Its alcoholic solution has a slightly alkaline reaction. Alstonin combines with acids, but does not completely neutralize them. Hydrochloric and other strong acids, also alkalies, decompose it partly on evaporation in the water-bath to a dark-colored acid substance.

AMPELOPSIS QUINQUEFOLIA,

which is said by eclectics to affect the skin, mucous membranes, and glandular system, in nearly the same manner as the Alnus. Its continued use for a long time is said to cure obstinate cases of *dropsy*. Dr. Lee asserts that it is a stimulant to the glands, and it is said to have cured enlargements of the lymphatics. I have had no personal experience with it, but Dr. P. H. Hale believes that it restored the secretion of milk in a lying-in woman who was very weak, tearful, and despondent. He gave it as a *dernier ressort* after Calcarea, Pulsatilla, and other remedies had failed to affect the secretion.

AMYL NITRITE.

The Nitrite of amyl is a singular and unique drug, having very little affinity for, and no close resemblance to, any other agent in our Materia Medica.

Its only similarity to *Glonoin* is in the *arterial relaxation* it causes, which simulates congestion. But the arterial turgescence of Glonoin is active and forcible, and always accompanied by *painful* sensations.

The congestion of Amyl is not due to any forcible rush of blood

into the cerebral arteries, but a passive filling up, owing to relaxation of those vessels. *Pain in the head is rarely* present during the effects of Amyl, although it sometimes occurs at the height of its effect. It differs from Belladonna in the *transient* character of the cerebral fulness. Its action is of shorter duration than Glonoin, lasting but a minute or two in most cases. Its rapidity of action is another peculiarity of this drug. In thirty or forty seconds, whether inhaled, subcutaneously injected, or swallowed, its action begins, and shows itself by flushing the face and starting the perspiration from the head, face, and neck. This property makes it more valuable than Ether or Chloroform in cases of severe internal spasms with pain, such as angina pectoris, or in epilepsy and asthmatic sufferings.

The most prominent symptoms induced when it is inhaled by man in moderate quantities (a few drops) are a sense of fulness and distension of the head, amounting at last to severe pain, and accompanied at last by intense flushing of the face, a deep, labored breathing, and an exceedingly rapid, violent action of the heart. The succession of these phenomena is so rapid that often they seem to be simultaneous; but it is said that the cardiac disturbance is sometimes very distinctly manifest before the other symptoms.

Dr. H. C. Wood, in his "Materia Medica and Toxicology," says of its method of action: "I have found as the results of numerous experiments made in the ordinary methods, that the diminution of reflex activity and of voluntary motion, which undoubtedly occurs in toxæmia from this agent, is chiefly *spinal* in its origin; since, after death, the nerves and muscles preserve, though in an impaired condition, their functional power. In the *motor* centres of the cord, the Nitrite is a direct and powerful depressant at the same time that it exerts a similar but much less pronounced action on the nerves and muscles, decreasing but not destroying their functional life. The diminution of reflex activity is never preceded by a stage of functional excitement. In some animals convulsions do occur, especially when the drug is administered by inhalation; but they are in all probability cerebral, not *spinal*, and due to the asphyxiating influence of the poison. Over the sensory nerves and centres, Nitrite of amyl has but little power.

They are among the last portions of the body to be affected, sensation being intact until near death, so that the drug *is in no sense an anæsthetic.* The cause of death appears to be due to the failure of power in the cord or respiratory centres higher up.

The fact that it is not an anæsthetic does not militate against its power to relieve the pain of angina pectoris and similar painful affections. Angina is now supposed to be due to *cramp*, or a spasmodic contraction of the cardiac muscle. Cramp may cause the most agonizing pain known to man. A remedy that removes the cramp relieves the pain, not by any anæsthetic power, but by relaxing the spasmodically-contracted muscle.

Wood proves quite conclusively that its action on the arterial system is not that of a *motor-stimulant.* Its action is *peripheric*, not centric. In other words, its apparent stimulating action on the heart is *reflex.* It paralyzes the arterioles, dilating them to such an extent that the heart gathers up and exerts its force violently for a short time; but if the inhalation be persisted in, its impulse constantly grows weaker, until its power is become extinguished.

After this examination of its physiological and pathological action, the question arises: To what abnormal conditions and symptoms is the Amyl homœopathic? It is *primarily* homœopathic to those cases where there is *dilatation* of the arterioles, and a *redness* and *flushing* of the surface of the body, not due to any primary disturbance of cardiac power. The action of Amyl, according to eminent experimenters, is *peripheric.* It first exercises a paralyzing influence on the coats of the arterioles. This paralyzing influence spreads to the centres, and the heart itself is the last to feel its influence.

This singular and unique quality of Amyl makes it one of the very few remedies which in their action correspond with the *physical effects of the mental emotions.* If you study the effects of excessive joy, you will see a remarkable resemblance to the action of Amyl, namely, a sudden flushing of the face, a distension of the peripheral arteries, a quick, bounding pulse, and an increase in the number and frequency of the heart-beats. But during this period of increased action there is really a diminution of arterial pressure at the surface of the body. Sometimes after this

Amyl-flushing has lasted a few moments, the face changes to paleness and coldness, and a faintness supervenes, and the same occurs after the flushings of joy. Other mental emotions have a similar action. *Joy* is only one example. Amyl is homœopathic to all such symptoms.

It is a singular and suggestive fact, and makes us very hopeful of the final acceptation of the law of *Similia* by the best men of all schools, that the foremost man in the allopathic ranks in England, Dr. Sidney Ringer, recommends, from his own actual experiences, the Nitrite of amyl for the very symptoms and conditions which it primarily causes. I quote from his "Therapeutics"—a splendid work, which should be in the hands of every homœopathic physician. (The *italics* are my own.) He says:

Dr. Brunton shows that it relaxes the whole arterial system, probably by partially paralyzing the sympathetic ganglia and motor nerves. This paralyzing effect of the arterial system is well shown by the sphygmographic tracings, the flushing of the face, and the increase in the size of visible arteries like the temporal, which often becomes notably large, sometimes, indeed, being doubled in size, and branches previously invisible become plainly apparent; and by the interesting fact observed by Talfourd Jones, who, while cupping a patient over the loins and finding that the blood would not flow, administered Nitrite of amyl by inhalation, when the cuts immediately began to bleed freely. After an inhalation the larger arteries are slower in recovering their normal size than the capillaries, a phenomenon well observed in the temporal artery, which remains enlarged half a minute or longer after the blush has quite left the face.

Dr. Brunton first employed Nitrite of amyl in *angina pectoris* with signal success, and found it more effective than any other remedy in this painful and dangerous disease. During an attack, his patient suffered from throbbing of the heart and carotids as high as the ears, with severe præcordial pain extending to the right arm. The usual characteristic "sense of impending death" was absent. The pulse was slightly quickened and the sphygmographic tracing became modified, for, as Dr. Brunton states, "as the pain increased the curve became lower, both the ascent and descent more gradual, and dicrotism disappeared. This form of curve clearly indicates that the arterial tension is much increased, and can, I think, be due only to contraction of the small systemic vessels." The increased tension first led Dr. Brunton to employ Nitrite of amyl. In the case in question he considers that the attack consisted of spasmodic contraction of some, if not all, of the small systemic and pulmonary vessels, which state of arterial tension gave way on inhaling the Nitrite, and the pain then disappeared. On the recurrence of an attack, the patient inhaled the Nitrite of amyl, and always obtained instantaneous relief.

Dr. Anstie reports a well-marked case of *angina* greatly relieved by this

treatment. He says: "The first sniff produced, after an interval of a few seconds, the characteristic flushing of the face and sense of fulness of the head; the heart gave one strong beat, and then he passed from the state of agony to one of perfect repose and peace, and at his usual bedtime slept naturally. This experience has, I am happy to say, been repeated on several occasions, and with this fortunate result, that so confident now is the patient of being able to cut short the paroxysm that he has discarded all use of Ether, and greatly reduced his allowance of stimulants." Dr. Talfourd Jones also finds it very useful in angina. Since the previous edition of this work, Nitrite of amyl has been largely used in angina, and with considerable success. Indeed, in most cases no other remedy affords so much relief. As might be expected, it is not uniformly successful. Thus, in one case due, as we discovered after death, to aneurism of the heart immediately below the aortic valve, an inhalation always arrested the pain, but it returned after a few seconds or minutes, even if the administration were several times repeated, and was as severe and lasting as when no Amyl was used. In another case, whilst it gave great relief, always arresting the paroxysm, it took ten minutes to effect this, and was in no way superior to a full dose of Ether, which the patient preferred, as the Amyl produced so much giddiness and sensation of fulness in the head. In three other cases, however, it proved strikingly successful. In one desperate case the slightest exertion brought on intense pain; but by the aid of Amyl the patient could always at once cut short the attack, so that now he can walk several miles, though he is obliged during his journey to employ the Amyl several times. It has appeared to me that by at once checking the paroxysm the attacks come on less frequently and less severely, and after a time a much smaller quantity suffices to control the pain; so that Amyl really contributes to the prolonged relief of these unhappy patients.

Dr. Talfourd Jones found it remarkably successful in very severe attacks of *asthma*, removing the dyspnœa immediately and averting its return. Others have found it very useful in asthma. He found it useful also in a case of cardiac dyspnœa, accompanied by extreme anasarca, due to a dilated and hypertrophied heart.

Dr. Sanderson suggests that it may be a relaxer of spasm generally, and Dr. Anstie has used it with success in cases of *spasm of the stomach*.

Dr. Talfourd Jones advises inhalation of the Nitrite in *syncope*, and thinks it should be of service in the paroxysm of *whooping-cough*. It is useful in *neuralgia*, at least in neuralgia affecting the fifth nerve. It often eases the pain at once, and in some cases a single administration has averted further attacks, but so signal a result as this is probably exceptional. Dr. Richardson finds that Nitrite of amyl arrests in frogs the convulsions due to Strychnia, and in this way he has saved their lives; and he advises a trial of the Nitrite, either by inhalation or subcutaneous injection, in *strychnia poisoning* and *tetanus*. In the foregoing diseases it is better to administer this remedy by inhalation, for, according to Brunton, it will not answer with anything like the same certainty when given by the stomach; for, in the striking case of angina pectoris just cited, he gave ten minims in brandy by the stomach, with the effect of staying the pain for only a short time, but a single inhalation afforded perfect and permanent

relief from the attack. It should be borne in mind that it affects some persons much more than others; one individual being able to inhale five or ten drops from a handkerchief, or to breathe the fumes from the bottle held close to the nose, while another on smelling a whiff from the bottle held at a distance will become affected with great giddiness, much mental confusion, and general weakness. Jones directs five or ten drops poured on a handkerchief, or the fumes from the bottle held close to the nose, to be inhaled till the pulse quickens, when the inhalation should be discontinued; but this plan is far too potent for some persons, especially feeble and sensitive women, who in the first instance should inhale a much weaker dose. As Jones points out, patients become habituated to it so that after awhile it must be inhaled several times before it affords relief. This habituation is well exemplified in the internal administration of the remedy. Jones also finds that by exposure it gets "flat" and loses its efficacy.

Nitrite of amyl is generally considered a powerful and even dangerous remedy, whose administration must be watched with great care, and only a measured quantity employed. I am sure it is not nearly so dangerous as is generally imagined, though it is true that nervous, sensitive women are far more powerfully affected by it than men. No doubt its administration at first should be conducted by a doctor, in order to ascertain how far the patient is susceptible to its influence, and that the patient may learn when he ought to discontinue the inhalation. But after one or two inhalations, patients soon learn how to administer it to themselves. I have now five patients with angina pectoris, who always carry with them a small bottle of this medicine, and on the first warning of an attack they at once begin to sniff at the bottle, whether walking or standing. This they have done for months, and one patient for just a year, using the inhalation many times daily, so that he consumes about two drachms a fortnight with still unfailing relief. Except in relieving the angina, the Amyl seems to produce no other effect on the system.

Dr. Jones recommends a trial of it in *epilepsy*. To an epileptic patient, who, in addition to severe and repeated attacks, suffered from much mental confusion, and was haunted many times a day with an indescribable dread and sensation as of an oncoming fit, although it came on only once or twice a week, the author gave it in three-drop doses thrice daily, and an additional dose on the earliest warnings of a fit. Amyl lessened considerably the frequency of the fits, and entirely removed the harassing sensations. Dr. Crichton Browne has lately published some valuable observations on the use of Nitrite of amyl in this disease. In two rabbits made artificially epileptic, he prevented the oncoming of the convulsions, which otherwise follow the application of the electrodes to the brain, by making them inhale Nitrite of amyl. By the same means he has likewise arrested epileptic attacks on the occurrence of the aura before the onset of the fit, and has even cut short the fit after its commencement. He has, too, obtained very satisfactory results in that form of epilepsy called status epilepticus —a condition consisting essentially of a succession of fits, linked together by intervening unconsciousness, the fits recurring with greater frequency till at last no sooner is one fit ended, nay, before it has finished, another fit begins. Fits like these he has arrested, and has rescued several patients out of this desperate

plight. Amongst other successful cases, Dr. Weir Mitchell reports one where the remedy was used immediately the aura was perceived, and other cases where the spasms lasted for hours, one fit following another. These two gentlemen give it by inhalation. Since my last edition I have given this remedy with considerable success to several epileptic out-patients, in whom the attacks have been very frequent. In some it has appeared to be more useful than full doses (20 to 30 gr.) of Bromide of potassium thrice daily; in another case, whilst it decidedly lessened the frequency of the attacks, it was less serviceable than Bromide of potassium. I have given it in two to five minim doses suspended in mucilage, every three hours or three times a day, and have not found these doses produce any unpleasant effects in these epileptics, nay, in some cases they have not even caused flushing, whilst in other cases patients have told me that they flush with each dose, but only whilst swallowing it.

The patient should take the medicine whilst lying down; and as some patients, especially women, are very readily affected by the drug, it is well in the first instance to give it in smaller doses. But until the remedy is pushed to two and in some cases to five minims every three hours, I have failed to obtain conspicuous results. Dr. Crichton Browne maintains that epileptics are more sensitive than others to inhalation of Amyl administered in this way. I imagine that this medicine will be useful only where the attacks are frequent, and that it cannot be given thus, where they occur only at comparatively long intervals of three weeks or a month.

Inhalation of Nitrite of amyl has been recommended in *sick headache*, and one successful case is reported by O. Berger.

The author has used this remedy extensively with considerable success in cases of the following kind: A woman, perhaps from the sudden arrest of menstruation, depraved health, or nervous depression, or, more frequently, at the change of life, suffers from frequent attacks of *flushings* or "heats," starting from various parts, as the face, epigastrium, etc., thence spreading over the greater part of the body. The face, and even the backs of the hands, are often deeply reddened, the veins of the hands in some cases dilating to double the previous size. Sometimes, although the patient feels deeply flushed, the skin remains natural. The sensation of heat may be so urgent that the patient opens her clothes or removes the greater part of the bed-covering, and even throws open the window in the coldest weather. These heats may last a few minutes only, or an hour or more, and may be repeated many times a day. Sometimes they occur chiefly at night, greatly disturbing sleep. They are generally followed by perspiration, often very profuse, at other times the skin remains dry; the attacks are then commonly termed "dry heats." The "heats" are often accompanied by great throbbing throughout the whole body, and are followed by much prostration, the patient feeling scarcely able to rouse herself.

After the heats pass away the skin becomes cold and clammy, and may turn very pale. The least exertion or excitement may bring on these heats, and such a patient generally complains of cold feet and sometimes of cold hands. The flushings are occasionally peculiarly and abruptly limited, reaching to the thighs, knees, or elbows, and while all the parts above these feel burning hot the parts below feel icy cold; sleep, too, is often much broken, the patient waking

with frequent starts, and in the morning feeling unrefreshed. In many cases palpitation or "fluttering at the heart" occur on the slightest excitement, or even without apparent cause.

Nitrite of amyl prevents or greatly lessens these flushings or "heats," and averts the profuse perspiration, throbbing of vessels, and great prostration. Sometimes it warms the feet and hands, and controls the fluttering of the heart, but in most cases it leaves these symptoms unaffected, and for their cure other remedies, as iron, are required. Amyl removes also giddiness, confusion of mind, heaviness in the head, and even headache; it generally produces calm, refreshing sleep.

When the flushings and perspiration are slight this remedy is scarcely needed; moreover, the perspirations are generally considered vicarious and beneficial at the change of life. The symptoms, in many cases, form only a minor part of the troubles of the patient, who may complain of great sinking at the epigastrium, or severe pains in different parts of the body, and other sufferings incident to this period, over which Nitrite of amyl has little if any influence. But when flushings, etc., constitute the chief part of the patient's troubles this medicine is most serviceable.

The Nitrite of amyl in ten days completely cured the following singular case of a woman who had been horribly tormented, for three years, with attacks, repeated several times daily, of severe burning sensation over the loins, from whence a glow of heat spread over the whole body, followed by perspiration. The burning sensation was so unendurable that she was constrained to open the window at night even in winter, and sometimes to rush out of doors.

For the symptoms thus described the author has generally administered this drug by the stomach, though inhalation answers as well. In respect of dose it must be borne in mind that, like Glonoin (Nitroglycerin), its effects vary very greatly with different persons. One, two, or even three minims produce in some only flushing of the face and slight giddiness, while in others even a drop will induce various disagreeable symptoms. Thus one woman immediately after a drop dose turned deadly pale, felt very giddy, and then became partially unconscious, remaining so for ten minutes. In another patient the same dose produced a sensation as if "a vapor spread from the throat through her head," and rendered her quite powerless for one or two seconds. A third of a minim dose sometimes excites great nausea or a tickling in the throat; and one delicate woman after one-thirtieth of a drop passed for a few minutes after each dose into a trancelike state, everything to her seeming unreal, and the breathing becoming rather panting. The author began with a minim dose, but was obliged to reduce this quantity, and he ultimately found that, for the most part, those patients can bear one-third of a minim without any disagreeable symptoms, but that a tenth, nay, even a thirtieth of a minim will in some patients produce the desired effect on flushing. It may be dissolved in rectified spirits, two minims to the drachm, and of this three to five drops should be taken on sugar every three hours, with an additional dose as soon as a flush begins. Relief generally ensues immediately, but sometimes not till the medicine has been taken for a week. As the patient grows accustomed to the remedy the dose must be increased.

Dr. H. L. Waldo, of Troy, N. Y., in a paper on the Nitrite of amyl, takes a somewhat different view of its action than I have given. I quote his remarks, and also his clinical observations:

Its power over all forms of spasmodic diseases is exerted by virtue of its direct action on the ganglionic centres of the sympathetic system, and not by any stimulating or paralyzing action on the capillaries, or any direct sedative action on muscular tissue, as certain allopathic physicians would have us believe. The vasomotor nerves, which are a part of the great sympathetic system, supply the muscular coat of the arteries, and thereby regulate the expansion and contraction of these tubes, and so determine the amount of blood that shall pass through them. It is well known that all spasmodic diseases, as asthma, chorea, epilepsy, etc., are due to a deficient innervation, and in turn this deficient innervation is due to a deficient supply of blood to the nerve centres; and this deficient supply is due to an irritation of the cerebral ganglia, which is transmitted by the vasomotor nerves to the coats of the arteries, causing them to contract. Now, *Nitrite of amyl* acts directly on the cerebral ganglia of the sympathetic, and produces a commotion in the circulatory system similar to that which occurs in an epileptic fit. "When it is given rapidly the lungs and brain are found blanched, and the left side of the heart empty, though the right cavities are gorged with blood. If given slowly it leaves a congested state of the brain and lungs, and blood is found in both sides of the heart."—"United States Dispensatory."

We see that its action falls almost entirely on the nerves of the arteries, scarcely any at all upon those of the veins, thereby greatly modifying the supply of blood to the brain, but not greatly influencing its return to the heart, and this again is just the state of things found in epilepsy.

In chorea and spasmodic asthma the spasm is due to the same cause, though it differs in extent. In syncope, too, we find the same condition of the cerebral circulation to which *Nitrite of amyl* has just been proved to be so peculiarly homœopathic, and in this affection it has been found very useful by allopathic physicians. It is a powerful cardiac stimulant. The excitement which it produces is followed by diminished but not extinguished action of the heart. A reduction of the respiration and circulation so extreme as to resemble trance may be induced and maintained for hours. Muscular action is at first "wildly excited," and then subdued by its use.

I fully believe that if administered just before an *epileptic fit* is to occur it will prevent the spasm of vessels, and hence prevent the fit every time; and in several cases that have come to my knowledge it has thus far proved permanently curative, preventing any recurrence of the fits. In a case of seven years' standing, brought on by masturbation, now under treatment, the patient carries a vial of it in his pocket, and when the aura occurs takes a few inspirations from it, and thus far has not failed to throw off the fits, a good many of which would certainly have occurred but for this treatment. Two fits have occurred while he was asleep and could not use the remedy. I have used it in several severe cases of *eclampsia* or *fits* in children, produced by various causes, and with the invariable result of at once breaking the fit. In a case of meningitis caused by a fall, while the child was kept under its influence the fits were pre-

vented or at once broken, but the child died in a few hours from the severity of the disease.

It may be inhaled directly from a small vial, or five or ten drops may be put on a sponge or small cloth, from which it may be inhaled. For children I make the first decimal dilution with alcohol, and put ten or fifteen drops on a handkerchief and hold it near the nose.—"American Journal of Materia Medica."

Dr. H. C. Wood, in speaking of its use in *angina pectoris*, says: "There is now abundant evidence of its value in relieving, almost instantly, agony which has resisted all other treatment, whether valvular disease or merely functional disorder exists." He adds, however, that "in cases of advanced fatty degeneration, or of very great dilatation of the heart, I think its use would be attended with danger, owing to its effect upon the heart's muscle."

Here we have the opinion of one who only looks upon its apparent *antipathic action* and the administration of large quantities by inhalation. But we can view it in another light. It is homœopathic to the very condition of debility alluded to by Wood, and in minute doses it may act promptly as a curative agent.

It will be remembered that we are warned against using *Chloral* in cases of weakened heart, because in large or toxic doses it paralyzes the heart. But it has been demonstrated many times, by myself and others of our school, that in small doses it actually *strengthens failing cardiac power;* as witness the remarkable case reported by Drs. Swan and Helmuth, and quoted under "Chloral."

Nitrite of Amyl in Ague—Dr. W. E. Saunders, of Indore, calls attention to the value of Amyl nitrite in ague, and records a number of cases in which advantage has been derived from its use. The drug itself, he remarks, is inexpensive and goes a long way. He now uses *Nitrite of amyl* mixed with an equal part of *Oil of coriander*, to render it less volatile and at the same time to cover its odor. He regards it as the most powerful diaphoretic he has seen, and he uses it in all cases of fever to produce diaphoresis. The following is one of his cases: Mr. F. C. came for treatment about 7 P.M. in the cold stage of ague. Two minims of Nitrite of amyl were administered; sweating came on in seven minutes. He lay down for half an hour to get cool, and then walked home well. He next morning took a dose of Quinine, and has had but one attack of fever without the cold stage since. Previous to this he had fever every day for one month, during which he took large doses of Quinine. Dr. Saunders observes that he does not mean to say that Quinine should not be used in the cases, for there is ample proof that it tends to check the return of the attacks, and removes to some ex-

tent the septic condition of the blood induced by the malarial poison, and this more especially if small doses of Opium be combined with it. In no case did the Amyl fail to remove the attack in about one-third the usual time, and in most cases the fever did not return. The method of administration he adopts is this: Four drops of the mixture or two of Amyl are poured on a small piece of lint, which is given into the hands of the patient, and he is told to inhale it freely. He soon becomes flushed, and both his pulse and respiration are much accelerated, and when he feels warm all over the inhalation is discontinued, as the symptoms continue to increase for some time afterwards. A profuse perspiration now sets in, which speedily ends the attack; in some cases, however, the cold stage merely passes off without any hot or sweating stage.—"Indian Medical Gazette" in "The Practitioner."

Pathogenesis.

The characteristic symptoms of Amyl, so far as we have gained the knowledge of them, have appeared in Allen's "Encyclopedia of Materia Medica," vol. i, from which I quote them, adding a few which I have gleaned from other sources.

Through an inadvertence they were omitted in Vol. I, "Special Symptomatology," and are, therefore, appended hereunto.

Mind.

Anxiety, as if something might happen; *must have fresh air. Actual fright* at the throbbing in the head, and a bursting-out feeling in the ears.

Mental confusion and a dreamlike state.

She passed for a few minutes, after each dose of one-thirtieth of a drop, into a trancelike state, everything seeming to her unreal.

Head.

Great confusion of the head, with vertigo.

Heat and throbbing in the head, with a feeling of intense fulness, with great heat and flushing of the face.

* *Beating, throbbing, bursting sensation in the head and ears, with constriction of the throat and heart.*

Visible pulsating throbbing in the temples, with sense of *tension* in the temples.

Sensation of something rushing upward, and throbbing in the vertex. Heavy, dull aching all through the head.

It causes no severe pain in the head until the acme of its effects is reached.

Sensation as if a vapor spread from her, through her head, and rendered her powerless.

Face.

Flushing of the face, a bright scarlet. It becomes intensely red and hot; on passing off the face became paler than usual.

A sensation as if the blood would start through the skin of the face, with lachrymation.

The flushing of the face is attended by heat and *perspiration* of the head, face, and neck, while the hands and feet become *very cold,* and sometimes *continue so for hours.*

° *Flushing and perspirations of the face and neck of women at the change of life.*

° Neuralgia of fifth nerve. ° Supraorbital neuralgia.

Eyes.

Protruding, staring eyes, with bloodshot conjunctiva.

Pupils dilated.

Sight very hazy, the outline of objects indistinct.

A spot on the wall appears of a yellowish hue, surrounded by a yellowish circle, and this again surrounded by a violet-blue halo, with undulating edges.

Under the ophthalmoscope *the veins of the disk were seen to become enlarged,* varicose, and tortuous; the arteries small, but not abnormally so.

Urinary Organs.

It causes a very profuse flow of urine, which contains an abundance of *Sugar* (in animals).

Ears.

Much throbbing in ears. ° Tinnitus aurium.

Bursting sensation in ears, as if membrani tympani of each ear would be forced out with each beat of the heart.

Nose.

Pressure over the root of the nose. ° Epistaxis.

Throat.

Choking feeling in the throat on each side of the trachea, along the carotids.

Feeling of constriction. *The collar seemed too tight, with desire to loosen it.*

Tickling in the throat.

Stomach.

Slight nausea, with uncomfortable feeling of the stomach.

Constriction and pressure over the region of the præcordia, as though he wants to rub it.

° Spasm of the stomach (Dr. Anstie).

° Very successful in seasickness (by inhalation or internally).

Chest and Respiration.

The feeling of constriction in the throat extended to the chest, and produced dyspnœa and asthmatic feeling in the larynx and trachea, with desire te eructate.

An indescribable feeling of fulness about the chest, with involuntary coughing, but the normal respirations are not altered in frequency.

It sometimes causes slight dyspnœa, or breathlessness, with inclination to cough.

A desire to sigh convulsively.

° Asthma, it removes the dyspnœa immediately, and prevents its return.

Heart and Circulation.

* *Præcordial anxiety.*

* *The beating of the heart and of the carotids is, in some persons, very marked.*

* *Accelerated heart-action, with increased frequency of cardiac pulsations.*

* *Great cardiac oppression and tumultuous heart-action.*

* *An aching pain and constriction around the heart.* (This sensation continued, more or less, for three weeks; was relieved by taking Cactus.)

It invariably quickens the *pulse*, but in a variable degree, *sometimes doubling its pace.*

While the pulse is always increased in frequency, it is not in force. Pulse irregular and jerking.

It relaxes the whole arterial system, probably by partially paralyzing the sympathetic ganglia and motor nerves.

° *Angina pectoris*, with throbbing of the heart and carotids as high as the ears. Very severe præcordial pain, extending to the right arm. (Dr. Sidney Ringer.)

* Angina pectoris, with great agony. (Drs. Brunton, Anstie, and Talfourd Jones.)

° Very successful in sun-stroke or heat-stroke.

Extremities.

Tired feeling of the limbs.

Tremulousness of the hand, and stiffness and slight numbness of the fingers.

Generalities.

General relaxed, weak feeling all over the whole body.

General sudden perspiration.

She turned deadly pale, felt very giddy, then became partially unconscious, remaining so for ten minutes.

A feeling of increased warmth and perspiration over the whole body, especially the head, face, and neck, while the hands and feet may become very cold, and remain so for many hours.

° A severe burning sensation over the loins, from whence a glow of heat spreads over the whole body, followed by perspiration. This sensation was so unendurable that she would rush to open a window at night, even in the winter, and sometimes rush outdoors. (This symptom had lasted three years, with several attacks daily, and was cured in ten days.) (Dr. Ringer.)

ANTIMONIUM IODATUM.

(*Teriodide of Antimony.*)

I have recommended this remedy in my work on *Sterility*, for uterine areolar hyperplasia, for which Tartar emetic has heretofore been used.

The remedy has been used with excellent results in bronchitis, humid asthma, and even in cases which simulated pulmonary phthisis. The symptoms present in the cases cured are: Frequent spells of coughing, with expectoration of frothy, white, or thick yellowish mucus; loss of appetite and strength; moderate febrile action; coated tongue; yellowish discoloration of the skin and conjunctivæ. In subacute bronchitis it acts like a charm. In chronic bronchitis with or without asthma it has brought relief when other remedies have failed. The dose is from one grain of the third decimal trituration to five grains of the second. The remedy bids fair to rival Tartar emetic (Tartrate of antimony and Potash) in the treatment of bronchial and pulmonary affections. From the nature of the elements of which the new remedy is composed we may expect that it will have a specific action on the skin as well as on the mucous membrane.

APOCYNUM ANDROSEMIFOLIUM.

Although belonging to the same *genus* as the A. cannabinum, it certainly differs very much from it in its specific action. The sphere of action of the Dog's-bane includes the muscular and fibrous tissues, especially those of the smaller extremities.

My experience with this remedy has been quite limited. I have used it successfully in two cases of "*rheumatic gout*," so called by an English surgeon of eminence. The symptoms corresponded so nearly that it was given in preference to Bryonia or Benzoic acid. Dr. Williams, of St. Paul, Minn., writes that he considers it the chief remedy for acute rheumatic affections in that region. When the acute pains in the joints are attended by *cramps*, bilious stools, and flying pains in the teeth, it will be well indicated, according to Dr. Henry's heroic provings.

Its curative power in *dropsy* is very much inferior to A. cannabinum, if it has any such power at all.

The tincture in drop doses has been known to expel ascarides and other worms. Its analogues are probably Bryonia, Iris, Colchicum, and a few others, but the drug needs further development to determine its true place.

APOCYNUM CANNABINUM.

This should not be confounded with the *India* hemp (Cannabis indica), a drug which has little or no analogy to this plant, and belongs to another family.

This is one of those remedies whose sphere of action is very limited, but in that sphere it is of immense importance. Its pathogenetic and curative action appears to be confined almost wholly to the *kidneys*—all the other symptoms seem to be the result. This action on the kidneys does not seem to go beyond passive congestion, with some irritation of the urinary mucous membrane, for even in the most heroic provings no trace of blood, epithelium, or other abnormal sediment is observable in the urine. *Primarily* it causes profuse discharges, the secretion being very light-colored. *Secondarily* it causes a peculiar torpid action of the kidneys, very scanty urine, but no pain or renal tenderness. I do not doubt but it could cause vesical and urethral pain, for it has cured such conditions.

This medicine had a reputation for the cure of dropsy in the early history of this country, and has retained that reputation in all systems of practice. Homœopathists have made many brilliant cures where they have used it rationally.

Dropsy, in its various forms, is the chief curative sphere of Apocynum c., but *renal dropsy* is strictly the proper sphere of its action. Other dropsies may be temporarily removed or palliated by its use, but not cured. It is this palliative power which gave it the name, among the early physicians, of the "vegetable trocar," meaning that its value was similar to that of tapping.

Anasarca, ascites, œdema of the legs, and even hydrothorax, may all proceed from suspended action of the kidneys, as an idiopathic affection. When this is the case the Indian hemp properly administered will rarely fail to cure if no *structural* disease of the kidneys exists. I will here repeat the two rules, given by me in "New Remedies," as a guide to its administration:

(1.) In cases of acute, idiopathic dropsies use the dilutions, beginning with the high, and descending more or less rapidly, according to the progress of the disease.

(2.) In chronic, atonic, or secondary dropsies, use the tincture, or the decoction in one or two-drachm doses.

The most brilliant cures ever made with the Apoc. c. were made with the infusion or decoction (℥j to one quart of hot water) in doses of half a drachm to four drachms. Even in acute dropsies the infusion acts more promptly than the tincture. This infusion can be "run up" to the third dilution, in water, if that strength is preferred. Like Digitalis, the Apoc. c. is often apparently inert if given in the alcoholic tincture.

There is no variety of dropsy but may be amenable to its palliative, if not its curative, action. Even in *dropsy from organic diseases of the heart* it will keep down the effusion and allow the heart a chance to regain much of its former strength.

In *post-scarlatinal dropsy*, or simple, uncomplicated *albuminuria*, it will often prove promptly curative.

Bright's disease cannot be cured by this medicine, and rarely by any other, but the dropsy may be kept in check so long as any considerable portion of the kidney is free from organic changes.

Hydrocephalus has doubtless been cured by Apoc. c., if we are to accept the statement of two eminent physicians, one of each school of medicine (see second edition of "New Remedies"). The symptoms were: (1) "Sutures of the head opened; forehead projecting, sight of one eye lost, the other almost; child lying in a stupor with constant involuntary motion of one arm and leg;" and, (2) "Paralysis of left side, one eye motionless, the other rolling, bowels disturbed, pulse slow." In the first case drachm doses of a weaker infusion cured. In the second, drop doses of the tincture. I think I have cured two cases with it, while it has failed in a great many; but in this respect it is no worse than the Hellebore, which has been so highly praised, and so unsuccessful. In addition to its value in *dropsy* the Apoc. c. has been used successfully in other disorders.

Nasal catarrh has been caused and cured by its use. The catarrhal symptoms are:

"Peculiar dryness of the mucous membrane of the nose, with a sensation of stiffness, followed by secretion of thick, yellow mucus, preceded in some cases by a thin, irritating discharge."

For this species of *coryza* the 2[x] trit. of the root is snuffed up the nose. The eyes, throat, and bronchia are affected with the same catarrh, which accounts for its popularity in *bronchial* and *asthmatic coughs*, for which it is certainly useful, as I have often proved.

Diabetes insipidus is one of the primary conditions caused by this drug, and the characteristic concomitant symptom is:

"A sense of *sinking at the pit of the stomach*, with great debility."

Like all powerful diuretics, the Apoc. c. sometimes proves powerfully emetic and cathartic. In dropsy, when the stomach is very irritable, and vomiting of all drinks is a troublesome symptom, the Apoc. c. often corrects immediately. Dr. Paine recommends it in *diarrhœa*, *intestinal hæmorrhage*, and *cholera infantum*, but I have never had any experience with it in such cases.

Uterine hæmorrhage has been cured by Apoc. c., according to Dr. Marsden, who gives us the only clinical experience we have of its use in that affection. In one case (*menorrhagia*) the flow was profuse, clotted, and attended by "great irritability of the stomach," fainting, etc. In another case the *hæmorrhage occurred at the change of life*, but was checked in a week, after lasting six. Several other cases of long-continued hæmorrhage Dr. Marsden reports cured by the Apoc. c. in drop doses of the tincture. In my practice it has appeared to *restore the menses* when given for dropsical conditions, and Dr. Barnes, of California, reports that he often cures with it *amenorrhœa* in young girls, when attended with bloating of the abdomen and extremities.

Dr. Lindsay reports his own case of severe *hæmoptysis*, which had resisted the use of Acon., Ham., China, and Erig., but was promptly checked by Apoc. c. 1[x], repeated every few minutes. Another physician says he has checked pulmonary hæmorrhage in consumptives with it. It would seem from the cures of hæmorrhage reported that it acts very similarly to Ipecac. in such cases, and is indicated by very nearly the same symptom, namely, the vomiting, or nausea.

APOMORPHIN.

This new alkaloid of Opium was discovered by Dr. Mathieson.

It is a snow-white powder, which is permanent when dry, but when moist soon becomes green. A solution suffers this change in a few hours, and in a few weeks the green color turns to black. For homœopathic use triturations should be made with pure, dry sugar of milk, and kept closely corked. I ought to say that Dr. Dyce Brown says the 3d centesimal dilution *does* keep its virtues a long time.

One of the most remarkable effects of this alkaloid is *sudden vomiting. As small a quantity as one-twentieth or one-fifteenth of a grain injected under the skin of an adult man will cause copious vomiting in five or ten minutes.*

Dr. Blackley ("British Journal of Homœopathy," 1873) gives a graphic account of its action. He injected ten minims of a ten per cent. solution of Apomorphin under the skin of his left arm. During the first two minutes no effect was produced. After about ten minutes the pulse began to rise slightly, and the respirations became slightly accelerated. At the end of four minutes he felt a sudden qualmishness, which was almost immediately followed by nausea and profuse vomiting. This continued for several minutes, and was followed, as soon as the contents of the stomach had been evacuated, by severe retching. On taking a draught of water with a little brandy in it this was immediately rejected; the same occurred after drinking cold water. No bile, however, came up in the vomited matter. At the end of seven or eight minutes from the commencement of the experiment he began to feel very faint, and was compelled to lie down, and almost immediately on doing so fainted entirely, and remained in a state of syncope for about five minutes. On awaking from this he felt giddy and chilly. He took a little brandy and water, which was retained. He then became drowsy, and slept an hour, during which he perspired profusely. On rising, he felt slight giddiness, but no desire to vomit; slept soundly all night; awoke pale and hungry.

Dr. Blackley made several experiments on animals, in which it developed more grave symptoms, convulsive and cerebral; but I doubt if they are useful to us.

The question arises: What use can we make of such a powerful drug? It will be noted that the vomiting is marked by *suddenness, completeness, and the absence of pain, or continued nausea.* It

occurs to me that we shall find it the *safest and quickest emetic in cases of poisoning*, when the object is to evacuate the poison as soon as possible. In such cases inject hypodermically one-tenth or one-fifth of a grain in a few drops of a recent aqueous solution, or give internally, in solution, one-fifth to one-third grain of the pure drug. Next to the mustard-water emetic it seems preferable to all others.

Dr. Blackley says it does not interfere with *digestion*, as a man to whom he gave it, vomiting at 8 P.M., at 9 P.M. ate a hearty supper and digested it. "This," says Dr. D. Brown, "coincides with what I find to be its sphere of action on the stomach. The cases where I have used it with success are chiefly those where *sickness* or *vomiting* constitute *the disease* under which the patient is laboring. The tongue is clean, the bowels are regular, there are no headaches, the patient has a desire more or less for food, and has no pain after eating, but a feeling of nausea comes on at intervals, especially after taking food, which may or may not be omitted. In other cases, when there is marked dyspepsia, and when Nux or Pulsatilla is indicated, I find Apomorphin very valuable, given *at the time* of the onset of the sick feeling, and repeated every ten or fifteen minutes until it is relieved. In other cases still, when the *vomiting is sympathetic*, as in the case of neuralgic headache, gall-stones, a cerebral affection, or uterine disease, Apomorphin is equally useful." Dr. Cooper states that he had seen it cause immediate cessation of vomiting in a distressing case where a tumor pressed on the brain.

Dr. Brown thinks it resembles *Ipecac.* I do not agree with him; for Ipecac. is useless in vomiting from cerebral and nearly all other remote irritations. Apomorphin will not cause vomiting in animals if the vagus is cut, or if the subject is chloroformed. Some authorities assert that so small a quantity as one-five-hundredth of a grain causes vomiting. This seems to prove, with Dr. Cooper's case, that the action of Apomorphin is central. If such be the case, it ought to cure or palliate all cases of *vomiting from cerebral disease or irritation.* I do not see how this can agree with the statement of Brown that it removes vomiting from uterine and hepatic disorder, but such seems to be the case.

Dr. Brown reports thirteen cases of *nausea* or *vomiting* cured

by Apomorphin ("British Journal of Homœopathy," July, 1874), viz.:

(1.) Case of nausea, with disgust for food; white tongue.

(2.) Case of a child vomiting for three days, bowels slightly loose, stools whitish, tongue white.

(3.) A woman of sixty vomits her food about an hour after taking it; nausea all the time.

(4.) Frequent vomiting, and almost constant nausea, in a woman.

(5.) A woman of fifty, constant nausea and vomiting, with pain and tenderness in the region of the liver, which was enlarged. He gave Bryonia and Apomorphin in alternation. He thinks the latter cured the sickness, as it was better after two doses.

(6.) A young lady with displacement of the uterus had almost constant feeling of sickness, with frequent attacks of violent retching, followed by intense prostration. This medicine relieved the vomiting after all others failed.

(7.) A lady of forty-two, with large ovarian tumor, had persistent vomiting; got immediate relief, after a fruitless trial of all other remedies.

(8.) Sickness and incessant vomiting in a sailor, tenderness over the liver, but no enlargement. Three doses cured.

(9, 10, and 12.) Vomiting of food in children.

(11 and 13.) Morning sickness and vomiting (the patients did not report, but he thinks they were cured or they would have returned).

Dr. Brown further says: "I have found Apomorphin successful in removing nausea which frequently presented between attacks of gallstones, and in a case of long-standing supraorbital neuralgia."

I have had no personal experience with this remedy, but would advise a trial of it in *seasickness*, and in the vomiting from riding in a carriage or in railway cars. Some points of its action remind me of Cocculus. Dr. Brown used the 3d cent. dil. invariably.

ARCTIUM LAPPA.

From time immemorial this plant has been used as a "blood

purifier" in domestic practice. It grows in nearly every country, and its popularity is almost universal.

Dr. Burt observed that its continued use in the form of decoction or syrup was quite successful in curing obstinate cutaneous eruptions, and it occurred to him to use it in practice. He claims to have cured several cases of *tinea capitis* "when the head was completely covered with a grayish-white crust, and most of the hair gone; the eruption extended to the face." These cases were cured by the Burdock after Sulphur, Iris, Merc., Graph., and Lyc. had been tried faithfully without benefit.

Crusta lactea has also been cured by this remedy.

Chronic erysipelas is said to be removed permanently by its persistent use.

My observations have been mainly confined to its use in *furunculi*, when crops of boils persistently occur. In such instances I have known its use to be followed by an apparent removal of the furunculous tendency. *Hordeolum* and ulcerated eyelids are benefited by it, and Old Culpepper recommends it in *fetid sweat* of the axillæ. *Abscesses of the axillary* glands have been cured by it. It appears to me to be an analogue of Hepar sulphur, Graphites, Phytolacca, and Sulphur. A proving may show this affinity; also its real value in *dropsy*, *dysuria*, and other disorders of the urinary organs, for which it has been recommended.

ARALIA RACEMOSA.

Although attention was called to this plant, so extensively used by the people in domestic practice, in the first and second editions of "New Remedies," it attracted but little attention, until Dr. Samuel A. Jones, of New York, made his graphic and unique proving, which was published in the appendix to my third edition.

It always seemed to me that a remedy so popular with the masses as a curative agent in *coughs* of all kinds ought to have some specific affinities for the respiratory organs.

Dr. Jones thought he had discovered its true sphere of action. Prescribing it for the symptoms which he elicited in his provings, he claims to have succeeded in curing some very severe cases of "*hay fever*," *humid asthma*, and some cases of *suffocating cough*.

As it may be interesting to the class, the most characteristic symptoms are here given:

Dry, wheezing respiration, with sense of impending suffocation, and rapidly increasing dyspnœa.

Very loud musical whistlings, during both inspiration and expiration, but *louder during inspiration.*

Could not possibly lie down; felt as if he would suffocate if he did not sit up.

The oppression first appeared to be all in the *right* lung; it then attacked the *left* lung, and the right became *entirely relieved.*

All the obstruction seemed to be in *inspiration.*

When the attack reached its acme expectoration set in; at first scanty, then increased in quantity, warm and salt.

A constant desire to clear the chest of something, so that I could *inspire* better.

On making a forcible expiration, in the attempt to clear the chest, had a raw, burning, sore feeling behind the whole length of the sternum, and in each lung.

Although Dr. Jones was "inclined to asthma," as he says, this attack was very different from his usual attacks. The question arises—would the Aralia originate an attack in a person *not* inclined to asthma? When we consider that it is drank in large quantities of the decoction without causing any such effects—so far as we know,—its power of causing such attacks *sui generis* is more than doubtful. But this will not prevent its being useful and homœopathic to asthma, especially in persons subject to attacks. Dr. Jones took ten drops of the mother tincture. I have greatly relieved asthmatics with the same doses, repeated every hour. For children the 2^x dilution acts well. The tincture to be potent must be made from the *fresh* root.

Dr. Jones relates a case of *hay asthma,* cured by Aralia, in which the characteristic symptoms were:

Yearly attacks of suffocative catarrh, with "extreme sensitiveness to a draught, the least *current* of air causing sneezing, with copious watery, acrid discharge from nostrils and posterior nares, of a salty, acrid taste, excoriating all the passages."

Waking at midnight, with suffocative breathing, inability to lie down, and the copious discharge above mentioned.

Relief of the asthma by bending forward, elbows on knees. *Inspiration* more difficult than expiration.

When the coryza ceased the trouble went to the lungs, with

dry, wheezing cough, ejecting yellow, threadlike pieces of tough mucus.

Aralia, ten drops, three times a day; cured in three days.

It has been used with apparent benefit in *dysmenorrhœa, leucorrhœa, and suppressed lochia,* but in these cases the home infusion was given.

ARANEA DIADEMA.

This remedy, heretofore rarely used except for hæmorrhages from punctured wounds, has lately been brought into notice by Grauvogl.

The pathogenesis, as will be seen by reference to Vol. I, is very meagre, being made up of fragmentary provings. But Grauvogl, like many of his countrymen, has the power, apparently, of evolving unfailing indications for a remedy out of his "inner consciousness" rather than from extended provings. Grauvogl (page 354) first mentions Aranea in the following way—after giving a clinical case illustrating the *hydrogenoid* constitution. He says:

"As I had found in my practice that Aranea diadema, still more than Nux and Ipecac., diminishes the influence of hydrogen on the system, and since it was also indicated, according to the laws of similarity, by the constant chilliness, I directed," etc.

The case he narrates is of a woman subject to catalepsy, periodical headache, etc. Her sufferings were always aggravated by *damp weather*, the *use of baths*. She was constantly chilly, with cold hands and feet, even in a warm room. The Aranea cured this case in a short time.

In another case of *enlarged spleen*, in a man subject to ague, who was constantly *chilly*, who lived in a *damp location*, and was worse when it *rained*, the 2^x of Aranea cured.

Grauvogl more than intimates that in certain cases this remedy would be a specific for *chlorosis*. He narrates a case of protracted pneumonia, when the patient was "*one day better, the next decidedly worse, and then at* 8 P.M. *he was worse than ever* . . . . he *felt chilly*, notwithstanding a constant sweat, and in spite of hot cloths to the abdomen." Nux and Ipecac. ameliorated the symptoms, but "*after eight days* he still was *chilly in the upper parts of the body.*" Aranea 3^x was given alternately with Nux, under which he soon recovered.

It does not matter with Grauvogl what the nature of the disease is, or where it is located, if the patient is constantly chilly he cures him with *Aranea* or some hydrogenoid remedy. Thus, an old man had an abscess on his heel, due to "chronic inflammation of the periosteum of the os calcis." The ulcer was gangrenous, very painful. Aranea relieved the pains, but the ulcer deepened. Silica and Calc. carb. aggravated. Because the patient was *constantly chilly,* and the pains *increased and decreased periodically,* he gave Aranea, and says he effected a "rapid cure," although the time was *five months* before the "cure" was complete.

On page 205 he gives a graphic description of a case of ague, in which the chill came on at 7 P.M. and lasted till 8 A.M. (no fever or sweat was present). He gave this patient 80 grains of Quinine, in three days, with no effect. Then he cured him with Aranea 2^x, five drops every hour. An *immediate* improvement was observed.

Additional cases, as follows, are reported in the "Allg. Hom. Zeit.," 55, 166.

(1.) A case of *chronic headache,* preceded by flickering before the eyes and vertigo, which forces her to lie down. The headache is attended with dulness, great heat in the face, weariness, loss of strength, and lasts one day. Cured by Aranea 6th.

2. *Toothache;* pinching, pressing pain in upper incisors, regularly from 9 A.M. to 7 P.M., leaving a sensitiveness and cold feeling on drawing in air. Nux was taken without result. The patient was bitten by a spider (Aranea), and "from that instant the pains gradually went off." This physician says he has often cured such toothaches, with sensation as if the gum or cheek was swollen, by means of Aranea 6th.

(3.) Pain in the temples, with vertigo on rising, and a disagreeable feeling, as if the hands and head were swollen. Cured by Aranea.

Dr. Chapman, in the "Annals of the British Hom. Soc.," vol. ii, cured a similar case in a very nervous woman, who, for several years, was nightly distressed with the sensation that her *hands and arms were enormously swollen.* She was speedily cured by this remedy.

In Europe, ever since Dioscorides, the spider's web has been used for *ague.* In this country it is used in domestic practice for

the same disease. Old physicians used it in epilepsy, palpitation from hypertrophy, spasms, neuralgia, sleeplessness, etc. It was given in pills about the size of a small pea.

I have never given Aranea but once, viz., when I thought it decidedly *called for by Grauvogl's indication*, but I saw no benefit from its use.

ARSENIATE OF ANTIMONY.

I use a great deal in cardiac debility, with concomitant dyspnœa, asthma, cough, and emaciation. It acts well in the 2ˣ trit. given three times daily.

ARSENITE OF COPPER.

This heroic remedy has always been a favorite one with me. Many years before it was proven by Dr. Blakey I had used it in many cases, and with uniformly good results. I selected it according to the indications afforded by the well-known provings of both drugs, and from the recorded cases of poisoning found in the standard works on toxicology. The reports of poisoning by sleeping in rooms which had paper colored with Scheele's green upon the walls afforded me many excellent indications.

I first used it in some severe cases of *cholera* which occurred in the years 1866 and 1867. These cases were marked by the usual intestinal disorder, to which was added severe and painful cramps in the abdomen and extremities. The alternation of Arsenicum and Cuprum did not prove as satisfactory as I expected, but the use of Cupric arsenite, in the 6ˣ trituration, in water for children, and dry on the tongue in adults, generally acted promptly. I can recommend it in *cholera infantum, spasmodic and neuralgic pains in the bowels, accompanied by screams, and cramps in the fingers and toes*, attended with great debility and threatened collapse. I have also used it with good effect in *chorea*, dependent on a profound affection of the nervous centres, and presenting the well-known characteristic symptoms of Cuprum, united to the dyscrasia which always indicates Arsenic.

In the treatment of some anomalous *disorders of the heart*, which may be designated as *cardiac chorea*, it is eminently successful. These cardiac disorders have not until lately been suf-

ficiently understood. They are marked by singular aberrations in the rhythm of the heart's action; at one time the beats are very irregular and *feeble*, at another *violent* and irregular. The attacks appear in paroxysms, with intermissions, during which neither auscultation or percussion reveals anything abnormal in the action of that organ. In some cases the irregular cardiac action is changed to choreic movements in other parts of the body.

In several cases of this character which have come under my care, the 3x trituration several times a day for weeks has succeeded in permanently curing a malady which is very distressing, if not serious.

ARSENIATE OF IRON.

I do not know if this remedy has been used in our school by any one but myself. I came to use it in this wise: I had a case of *chorea* in a pale anæmic girl. She had been dosed on the Tinc. ferr. mur., Citrate of iron and Quinine, Fowler's Solution, and other drugs; but I felt that Ferrum was indicated. Arsenic was also indicated, and as a matter of convenience I had prepared the 2x trituration of the *Arseniate of iron*. This patient, who had been dosed with massive doses of both medicines without good effect, recovered rapidly under the use of minute doses of this compound drug.

We have no provings of this drug, nor do I know that any are necessary. If we take the well-known effects of both as a basis for our indications, we shall succeed very well and avoid alternation. There are very few drugs, if we except the bromide salts, which are changed by a true chemical union. I have used the Arseniate of iron a good deal, and its effects have rarely disappointed me. My selection has been based on the Ferrum blood-impoverishment, and the well-known effects of Arsenicum on the nervous system.

I have never used it in any gastric or intestinal disease, because I have an idea that the Arsenicum alone, or the Arsenite of copper, is a better remedy for such cases. But if I had to treat cutaneous diseases in which Arsenic was indicated, and the patient was decidedly chlorotic or anæmic, I should prescribe the Arseniate of iron with a great amount of confidence.

ARSENIATE OF QUINIA.

This is another unproven drug, which I think ought to be used more than it is by our school. My experience with it in a certain class of malarious diseases has been quite satisfactory. While engaged in practice in a miasmatic district I frequently had to treat mismanaged *intermittents* of an obstinate character. They were generally of a mixed type; sometimes *tertian*, then *quotidian*, and often changing to a *masked form*, such as *periodical neuralgia* and various *obscure neuroses*. To treat such cases was like chasing a "will-o'-wisp" through a dark swamp, especially if I tried to treat them symptomatically. In fact, I can assure you that it is useless to treat the *symptoms* of such cases, for you will have to change your remedy every day, and then fail to cure the disease, which will constantly elude you. You must strike at the root of the malady; you must select the remedy for the *genius of the disease*, FIRST; afterwards characteristic symptoms may be taken into account.

In the majority of these obstinate and masked intermittents both Arsenicum and Cinchona are indicated, and instead of using them in alternation I hit upon the plan of prescribing this compound or chemical union of the two drugs. Some cases required the 1^{x} trituration, but rarely did I have to use it below the 2^{x}. It was usually ordered in doses of one or two grains every two or four hours, and the patient was urged to persist in its use for several weeks. This plan, aided sometimes by a temporary removal to a non-malarious region, was generally very successful in eradicating the disorder.

Dr. George A. Hall, and several other physicians of Chicago, are enthusiastic in their praises of this remedy. He values it very highly in all diseases where Arsenic and China are indicated. In diseases of children, characterized by chronic intestinal derangements, combined with debility from loss of fluids and poor nutrition, he prescribes the 3^{x} trituration with good results.

I have never given it higher than the 6th dilution. Pellets saturated with this attenuation often act kindly in children of sensitive nervous systems. I believe it will prove a valuable addition to our Materia Medica.

Dr. W. H. Holcombe, in a clinical lecture on "Primary Chronic Malarial Poisoning," says: "It is only by prolonged treatment that we can effectually cure these insidious and complicated chronic diseases. If the remedy now chosen fails to make an impression in a fortnight, I shall probably remind you of two others which I have found exceedingly valuable in these cases of chronic malarial poisoning. These are the Arseniate of quinine and Arseniate of iron. I use them in the first centesimal trituration, not the decimal, for there is too much Arsenic in them for that. I prefer the former when the nervous system is more deeply implicated than the organic; and the latter when the anæmia seems to be the preponderating element in the pathological state."

ARSENIATE OF STRYCHNIA.

Several months ago the Liebig Manufacturing Company of New York sent me, among several new and unique drugs, a small quantity of the Arseniate of Strychnia, from which I had prepared triturations up to the 6th centesimal.

It occurred to me that cases might occur in which both remedies might be so strongly indicated that I would feel justified in giving this combination. These powerful remedies affect the human organism in a very different manner. *Arsenic* affects profoundly the fluids of the body, the glandular organs, and the mucous system. Strychnia has as great an affinity for the nervous system, especially the spinal cord—the motor and trophic nerves.

My first case was one of *chronic diarrhœa* in a child. The diarrhœa choradentes were all covered by Arsenicum. But there were many symptoms which called for Nux, or its alkaloid, *Strychnia*, namely, paralytic conditions of the bladder, rectum, and lower extremities.

I might have given Arsenicum until *its* symptoms were cured, then followed it by Nux to cure the remainder. This would be following the strict Hahnemannian doctrine as taught by some of our school. But I doubt if Hahnemann himself would have done so in this case, for the condition of the patient was such as to cause serious anxiety, and it would not answer to lose time in treating him *secundum artem*. Therefore, I prescribed Ars. Strych. 4th,

one grain every three hours. The result was all that could be desired—a rapid recovery followed.

This case will afford an example of the class of diseases for which this remedy is indicated. I cannot imagine a bigotry so narrow as to deprive one of using a drug because it has not been proven, especially when we are well acquainted with the pathogenetic action of its constituents, as in this case. Some of our remedies, which have made the best cures and have served most to make Homœopathy popular, have not been proven.

I recommend a trial of this remedy in complicated disorders, when the mucous, glandular, and nutritive system is deranged, and the nervous system is seriously implicated; in the various forms of *paresis, paralysis*, chronic ulceration, wasting diseases, and even cholera, typhus, and malignant dysentery.

ARUM TRIPHYLLUM.

This Northern representative of a family which, in the tropics, attain great size and intense virulence, has been used in the *dried* state, ever since the settlement of the United States, for *coughs* of various kinds. The dry bulb is almost tasteless, the acrid volatile principle having escaped. The homœopathists were the first to use any preparation of the fresh bulb. It is very difficult to procure a permanent tincture of the fresh root. Alcohol does not preserve it. Glycerin with alcohol is some better. A distilled water, to which sufficient alcohol is added, may be a successful method of preparation. The virtues of the drug doubtless reside in the acrid, volatile principle, and it is probably the minute quantity retained in the dry bulb which gives it some of its curative power.

Its sphere of action appears to include the mucous membrane of the mouth, fauces, larynx, and bronchi, and it probably exerts some disorganizing effect on the blood. It has been used successfully in

Malignant scarlatina, with "delirium; nose discharges much watery, thin, ichorous fluid, making the nose, lips, and corners of the mouth cracked, sore, and bleeding; excoriation of the inside of the mouth; tongue red, papillæ swollen and prominent; sore,

moist places in the bends of the thighs and knees; submaxillary glands swollen; voice hoarse; pulse 140, full; urine very abundant and pale; eruptions all over the body, with much itching and restlessness." Another symptom, which is an important "key-note" for this remedy, is "the children pick the nose and lips and chin persistently, until they are raw and bleeding." In a few cases where this symptom was very prominent the *Arum* has appeared to act promptly. In its relation to scarlet fever it is analogous to Arsenic, Nitric acid, Ailantus, and Phosphorus. It is used from the 6th to the 200th.

Sudden hoarseness and loss of voice, in public speakers and others, is promptly cured by Arum.

Tonsillitis, sudden and painful, *œdema of the glottis*, *catarrhal angina*, *glossitis*, and similar inflammatory affections of the mouth and throat, should be cured by this remedy. In all these diseases the symptoms indicating the *Arum* are the pricking, stinging pains and the *sudden* swelling of the tissues, as well as the subsequent burning, excoriating discharge.

The British species, Arum maculatum, is nearly identical, and may be used for the same symptoms as the A. triphyllum. Its value in *coughs* and asthmatic affections has not been fully tested; further experience and provings are needed.

ARUM DRACONTIUM.

This drug was proven by Dr. C. P. Hart, of Wyoming, Ohio, and was published in the "American Homœopathic Observer" of the year 1875. Dr. Hart was forty-six years of age, and seemed quite susceptible to the effects of the drug, although he states that he "never before had any laryngeal, bronchial, or pulmonary disorders." This proving was not incorporated into Allen's "Encyclopedia of Materia Medica," because the *first* volume of that work was published the year *before* the proving was published. Dr. Hart's proving of this species of *Arum* is an excellent one. It brings out some of the finer, as well as the general characteristics of the remedy. The *Arum dracontium* is the only other species besides the *Arum triphyllum* and *Arum quinatum* in the United States. All the family of *Araceæ* possess similar acrid,

poisonous principles, but it is one of the mysterious works of the Great Designer that this virulent poison is enveloped in one of the purest and most innocuous vehicles known, namely, *arrowroot*. Much of the *arrowroot* of commerce is made by separating it from the acrid principle in the roots of members of this family. It is interesting to note the resemblance in pathogenetic effect between the various species of *Araceæ*. The symptoms of the three *Arums* are very similar. Dr. Hart's proving has developed also a marked resemblance between the *Arum dracontium* and *Caladium* (*Arum sequinium*). Both cause pruritus of the sexual organs and incompetency. Both cause urticaria and other eruptions, probably neurotic, as Dr. Hart suggests. Both cause laryngitis of an aggravated character, and both have cured all the above conditions.

A near relative of the *Arum*, the *Symplocarpus* (*Skunk cabbage*), ought to be proven; also the *Alisma plantago*. Dr. Streeter uses Symplocarpus in nausea and vomiting of pregnancy, and it has been found useful in hysteria and chorea.

Dr. Hart theoretically recommended it for *laryngeal diseases*, especially for those of a subacute or chronic character. He gave but a few clinical verifications, but they were very suggestive. One case was "asthmatic attacks at night, from a cold, which had resisted *Lobelia* and *Tart. em.* A few doses of the *Arum d.* 1ˣ trit. arrested the paroxysm." Another case: "A child three years old; hoarse, *croupy cough*, with sore throat, rattling, laryngeal respiration, and considerable swelling of the air-passages, threatening suffocation. A dose of the 3ˣ ameliorated in twenty minutes, and after three doses the child slept quietly till morning." Since these cases were published, Dr. Hart and others, with myself, have frequently verified these clinical observations. Dr. Hart says it cured him of a "chronic *pruritus scroti* of twelve years' standing." This reminds us of the action, both pathogenetic and curative, of *Caladium*. It may prove a very valuable ear remedy.

SYMPTOMATOLOGY OF ARUM DRACONTIUM. (Green Dragon.)

Analogues.

Arum triphyllum, Arum maculatum, Arum italicum, Ailantus, Argentum nit., Belladonna, Causticum, Carbo veg., Eryngium,

Hepar sulph., Iodine, Kali bich., Nitric acid, Merc. iod., Phosphorus, Phytolacca, Rhus vernix, Sticta, Sulphur, Sanguinaria, Spongia, Wyethia.

Head and Neck.

Shooting pains in the left anterior inferior triangle of the neck near the clavicle. Head feels heavy and aches slightly in occipital and right parietal regions.

Eyes.

Aching pain over the left eye; pain transient; conjunctiva highly injected. Eyelids dry, stiff, and slightly agglutinated at their edges, which burn and smart. Heat, dryness, and smarting of the eyelids.

Ears.

At 8 A.M. shooting pains in the right ear. They are transient but frequent, and leave a *feeling of fulness and slight aching in middle ear* (next day changed to left ear, same symptoms except no shooting pains; feeling of warmth and fulness in left middle ear); next day is again in right ear; left ear normal. A feeling of warmth and fulness in the ears, sometimes in one and sometimes in the other; seldom in both at once; aching pain behind right ear; shooting pains in the right ear, sometimes very severe; deep shooting pains in the right ear, occurring frequently and continuing sometimes for ten or fifteen minutes; the ear-pains are still more persistent; occasional shooting pains in left ear; accumulation of mucus in the left Eustachian tube. (See Throat Symptoms.)

Nose.

Eruption of pimples; a species of lichen on the nose.

Mouth and Fauces.

In five minutes felt a peculiar *acrid sensation in mouth and throat.* Disposition to swallow arising from excess of mucus in throat; a slight uneasiness in throat and disposition to cough; slight soreness of muscles of throat; excess of mucus in throat; loose cough with dry soreness of the throat closely simulating a mild attack of catarrhal angina—most *marked* during the act of

deglutition. *There is a feeling of *dryness and smarting in the throat*, a feeling of *rawness*, with a sense of *fulness*, not really painful, but sufficiently annoying to attract constant attention. **Hawking*; **hoarseness*; expectorated a quantity of thick mucus; produce a *continual disposition to clear the throat by swallowing* and *coughing*. **Throat raw and tender*.

Aphthous ulcer appeared on the tongue, and on the following day (seventeenth of proving) the mouth and throat became so sore that the proving had to be discontinued. For the week following was troubled with an annoying cough and rattling of mucus; worse at night lying down. One week later recommenced the proving, causing **constant rawness of the throat, constant coughing*, with mucus in the morning; bad taste in the mouth; tongue and mouth coated with a foul, slimy mucus having a putrid taste. Expectoration consisting of thick, heavy, yellowish white pus (?); continuation of violent cough; rawness of throat and purulent expectoration.

Larynx.

Rattling of mucus in the larynx at every full *expiration*, which disappears in the morning. Accumulation of mucus in throat, the raising of which by coughing produces a rattling of mucus in larynx. Excess of mucus in larynx (see Throat); increased **soreness of the larynx*, and great disposition to cough. **About midnight great oppression of breathing*, soon passing off, leaving considerable rattling of mucus in the larynx and upper part of the trachea. Rattling of mucus in the larynx during expiration, but which ceased on rising except when the expirations were prolonged by voluntary effort. **Paroxysms of dyspnœa would sometimes occur with much aching in the chest*, always associated with a considerable secretion of mucus in the larynx and trachea. Much rattling of mucus in the larynx and an *annoying cough*. Cough from laryngeal irritation, worse at night and when lying down. *Expectoration of thick, heavy, yellowish-white pus from larynx in large quantities*. Very much annoyed by the gravity and persistence of laryngeal symptoms; its influence is deepseated and permanent on the larynx. (Hart.)

Croupy cough, with hoarseness and *rawness of the throat*—during an epidemic influenza. (Hale.)

Stomach.

Eructation of flatus from the stomach, tasting of the medicine. Pain in the bowels, caused by incarceration of flatus; escape of flatus from stomach and bowels; sinking feeling at the pit of the stomach; copious semi-liquid stool, with much flatus; bilious passages from the bowels, attended with aching in the abdomen and burning in the rectum; twenty-four hours later, a bilious diarrhœa, borborygmus, and the escape of much flatus from the bowels.

Urinary.

Irresistible desire to pass urine, which is diminished in quantity, very high-colored, and has a burning or smarting effect on the urethra. (Primary.) Second day, frequent, copious emissions of limpid urine; inclination to urinate every hour or so during the day; urine increased to four or five times the normal amount; tenderness and slight smarting or burning of the orifice of the urethra, especially during micturition. (Secondary.)

Sexual.

During the proving a great diminution, and most of the time an entire absence of the sexual desire; penis flaccid and relaxed. This condition of generative organs continued for a long time afterwards. Fine shooting pains in the course of the left spermatic cord. °Chronic pruritus scroti.

Respiratory Organs.

Retired to bed and slept well the first part of the night, but **awoke about midnight with great oppression of breathing, a kind of asthmatic attack,* which, however, soon passed off. Great languor and depression of spirits; dull, heavy aching in head and chest. **Paroxysms of dyspnœa* would sometimes occur, with much aching in the chest, and always associated with a considerable secretion of mucus in the larynx and trachea.

On the nineteenth day of proving, a full dose produced a violent *asthmatic attack at night,* and lighter ones on each succeeding night, for about a week, when they left me altogether.

Pulse.

80, full, hard, and somewhat jerking, which soon becomes small and irregular; artery seems to roll under the finger, and requires considerable pressure in order to be correctly counted. Later, the pulse becomes moderately full and more regular. The pulse continues full, soft, and regular. On third day after taking a large dose, pulse became feeble, 84—small, and somewhat irregular.

Heart.

Five minutes after taking a dose the heart beat so violently as to shake the walls of the chest (reflex symptom—Hale), slight aching pain in præcordial region and down the left arm, flushing of hands and face, and increased heart's action.

Back.

Aching along the spine, particularly between the shoulder-blades and the lumbar region; great weakness across the loins; feeling of extreme prostration. The last-mentioned symptoms continued to increase until the exhaustion became so great that I had to retire early.

Extremities.

Tingling, or slight stinging sensation in the fingers, as when circulation is impeded; fine tingling sensation all over the right hand, which is warmer and redder than the left, and appears somewhat swollen; aching pain in the left forearm, left hand, and right humerus; tingling or slight stinging sensation in the toes, as when circulation is impeded; sharp, shooting pains at the styloid process of the right ulna; right hand remains somewhat red and swollen. Fine tingling or pricking sensation in the hands and feet, especially the right. Shooting pain down the right thigh. Fine pricking or tingling sensation in the feet and hands, beginning in right foot, and afterwards affecting in regular succession the right hand, left foot, and left hand. Occasional shooting pains have occurred during the same time, in the following order: right malar region, right external malleolus, thenar eminence of right thumb, left malar region; occasional shooting

and aching pains along the right humerus and right thumb. Slight aching pain in the præcordial region and down the left arm. Aching pain along the outer aspect of the left foot, immediately followed by a similar pain in the corresponding part of left hand; shooting and aching pains in the left brachial plexus of nerves. Sharp shooting pains at the styloid process of right ulna. Preternatural heat in the palms of the hands; burning of the soles of the feet.

ASARUM CANADENSE.

This plant only differs from the Asarum *Europœum* in degree. Its effects are similar to the foreign root, but less irritating and potent. The same qualities, however, have been ascribed to both. The indigenous species has the reputation of being an "emmenagogue and abortivant" in domestic practice. In Europe and England the foreign species has the same reputation, and is even credited with the power of causing miscarriage.

That the foreign plant possesses an irritant action on the uterus is proved by its pathogenesis and the testimony of the old physicians. Our species may have the same action, but in a minor degree. I have never used it but once, and then in a case of *pain in sacrum following miscarriage.* It seemed to relieve. It was prescribed as a substitute for the A. Europæum.

Theoretically I should place it as an analogue of such *new remedies* as Senecio and Trillium.

ASCLEPIAS INCARNATA.

When this remedy was mentioned in the second edition of "New Remedies," I supposed it would be used and proven, but no clinical experience has been reported. I have tried it several times in *gonorrhœa,* on the recommendation of Dr. Hauser, but without good results. Dr. Fowler recommended it in *amenorrhœa,* but no verifications have been reported. Only a systematic proving will show its real value as a medicine.

ASCLEPIAS SYRIACA. (A. Cornuti.)

This is really a potent plant, and one that ought to prove useful if prescribed with judgment. The proving by Dr. Clerborne was a singularly careful physiological experiment for a member of the allopathic school to make.

The head-symptoms were quite notable, and the following symptoms are especially valuable:

(1.) "When the drug did not cause *sweating* or *profuse urination*, it caused *violent headache with vertigo*, pulse quick, full, 92."

(2.) "A feeling as if some sharp instrument was thrust through from one temple to the other, with feeble pulse and cold skin."

(3.) "Violent headache between the eyes; a sense of constriction across the forehead."

I would particularly recommend it in

Congestive headaches from suppression of sweat or urine and fever. Also

Nervous headaches, which are attended by dry skin and scanty urine, cool skin and feeble pulse, and followed by sweating or profuse urination. In the latter cases it may rival Ignatia, Pulsatilla, or Gelseminum.

Diarrhœa, brown or yellow, with nausea and vomiting, and the headache above described in the *second* symptom.

Constipation has been cured by the administration of 10 to 30 drops of the tincture three times a day.

I predict that its chief curative value will be confined to those cases in which the organic and inorganic solids, which should be eliminated by the urine, are not excreted fully. Like Colchicum it causes the amount of solids excreted to greatly increase (from 565 grs. to 700 grs.), or an increase of 132 grs. in six days. This power would make it the best remedy in the *uræmia of pregnant women*, or for any cause; also in *post-scarlatinal dropsy*, when it would rapidly eliminate the poison of the disease, and prevent the unpleasant sequelæ.

Dropsy, especially when caused by renal diseases of an obstructive character, ought to be cured as readily by Asclepias s. as by

Apocynum, and perhaps more promptly. In the provings it caused the urine to increase from the normal quantity of 35 ounces to 135 ounces in six days. This shows its immense power over the secretory power of the kidneys, and that it is secondarily homœopathic to dropsy, for the secondary effect of such hyperstimulation must be an almost complete arrest of secretion and excretion. It has cured many cases of *renal dropsy* when given in the tincture and infusion. I have palliated many cases of *cardiac dropsy* by its use, and with many of my colleagues it has a high reputation in acute cases of *anasarca from sudden check of perspiration.* Since the last edition of this work was issued, clinical experience has verified its great value in all forms of dropsy.

It is homœopathic to *dysmenorrhœa* and *threatened abortion*, when the pains are intermittent, and pressing from the sacrum to the hypogastrium, with scanty flow.

Rheumatism has been successfully treated by many physicians by the use of this species. Dr. Lee says it rivals Cimicifuga. Dr. Pattee states that in six cases of acute rheumatism it caused the average duration to be confined to eight days. The inflammation was confined to the large joints, with considerable pain and swelling. It had a remarkable effect in relieving the pain. The lowest dilutions will probably be found most useful.

ASCLEPIAS TUBEROSA.

This plant, commonly called Pleurisy root, is one of the oldest in use, and one of the most popular of all our indigenous remedies. The popular name given to the root indicates the estimation with which it is held. The early physicians incorporated it into the Pharmacopœia, and its use by eclectic practitioners is varied and extensive. Their principal use of this Asclepias is in disorders of the respiratory organs, and in nearly the same conditions as we use Bryonia. We have only two provings of this remedy, one by Dr. Savery, of France, the other by Dr. Nichol, of Montreal. The former I consider untrustworthy in the main, because only *two* drops of the tincture were taken, and all the symptoms for *forty* days recorded! Dr. Nichol took every day

twenty to forty drops of the 1ˣ dil. and θ, and got symptoms which were characteristic.

I believe this Asclepias acts chiefly on the *mucous surfaces*, especially those of the respiratory organs, and the *serous tissues*, especially the pleura and synovial membranes.

It is common in the country for the people to treat *pleurisy* and *pleurodynia* with an infusion of the root. When sweating occurs, the pain subsides. *Bronchitis* is also treated successfully in the same manner. Our provings testify to the fact that it is homœopathic to these affections.

The *chest* symptoms of Nichol's provings are:

"*Cough* dry and spasmodic, with constriction of the throat; harsh, dry cough, causing pain in the forehead and abdomen.

"Dull pain at base of both lungs, with a feeling of tightness.

"Sharp pains shooting from left nipple downward.

"Sharp, cutting pain behind the sternum, aggravated by breathing, moving the arms, singing, or loud talking.

"Acute, darting pains in left side, shooting over to the right, and up to left shoulder, with tenderness of the spaces between the ribs.

"The pains left the left side and attacked the right side, and extended to right shoulder.

"The pains were *relieved* by bending forward."

These symptoms give us a fair picture of a case of subacute pleuritis. The fever was slight (pulse 88).

I have used it successfully in mild cases of pleurisy and *intercostal rheumatism*, giving the 1ˣ frequently repeated. Dr. Nichol had many rheumatic symptoms. The pains were stitching and aggravated by motion.

The Asclepias is especially adapted to the diseases of *children*, not only the thoracic but the intestinal. It resembles Ipecac. in this respect. It is also useful in *asthmatic* complaints and catarrhal affections of old people. It is useful in the *coughs* and colds of children, in "snuffles," in catarrhal croupy coughs, and suffocative catarrh. The *fever* attendant is not very severe, the skin is hot, but at the same time moist. It is indicated in those cases of *catarrhal fever* in which the intestinal mucous membrane

is affected simultaneously with the bronchial, and as having slimy, green alvine evacuations.

I have prescribed it with benefit in subacute rheumatic *pericarditis*, when there was pinching pain in the region of the heart, extending to left shoulder, palpitation, feeling of contraction in the cardiac region, tenderness over that region, fever, with hot, moist skin.

Catarrhal dysentery, with rheumatic pains all over, yields readily to this medicine. I usually use the mother tincture or 1^x, 20 drops in half a glass of water, a spoonful as often as seems necessary. If oftener used, instead of Bryonia, I think it would gain in favor with our school.

ATROPIA.

It may seem out of place to call this drug a *new* remedy, when Belladonna is so old, but Atropia was not used in homœopathic practice until about the year 1860, or about the time the new remedies began to appear in our school.

No complete provings of Atropia have been made, but the symptoms which have been obtained, both from provings and cases of poisoning, are identical with many of the symptoms of Belladonna.

Atropia cannot cause *all* the symptoms of Belladonna, any more than Quinia can cause all the symptoms belonging to China, for the reason that it does not contain all the medicinal forces residing in the plant. To the mere chemist, or the crude experimenter, there seems nothing of value left in the plant after the extraction of its active principle. But they do not appreciate the fact that there are intangible or atomic forces in plants which do not reside in any alkaloid or resinoid, and will escape the subtlest analysis of the chemist. These medicinal forces can only be evolved by careful physiological provings on the healthy.

Atropia, therefore, cannot represent the Belladonna in the treatment of disease, except in *its* own limited sphere.

I cannot advise the use of Atropia in the febrile diseases, in acute or chronic exanthemata, inflammations of organs and tissues, or certain cerebral disorders, for which we have in Belladonna such an admirable remedy.

Its sphere of action appears to me to include the *nervous system*, affecting alike the nerves of sensation, motion, and the sympathetic. In *functional disorders* of these nerves, especially when *hyperæsthesia* and *irritation* obtain, Atropia will prove a valuable remedial agent.

In *neuralgia*, certain acute congestions of a nervous origin, painful spasmodic affections, especially of the sphincters, and nervous jactitations, hyperæsthesia, spinal irritation, etc., Atropia will often do better service than Belladonna.

Its action is analogous to Solanum, Stramonium, Agaricus, and many of the analogues of Belladonna.

I cannot accept the assertion of allopathic experimenters that Atropia *contracts* the bloodvessels of the brain and spinal cord. We have abundant evidence that it causes death by acute congestion of the brain. As to its action on the bloodvessels of the spinal cord, I am not prepared to dispute the statement of Brown-Séquard, who says that "it is a powerful excitant of bloodvessels, and especially those of the spinal cord and its membranes. In consequence of this influence, it diminishes the amount of blood in the vertebral canal, and in so doing produces a relative diminution of the vital properties of the spinal cord and its nerves."

But granted that this is its primary action in toxical doses, its *secondary* action is directly opposite. In death from poisonous doses, the surface of the body is pale and cold, and the internal organs all congested. But death must in such cases occur from its secondary action. Death rarely occurs from its primary action.

In homœopathic practice, we usually prescribe Atropia for symptoms similar to its secondary effects, for all the morbid conditions which I mentioned as indicating Atropia are due to such secondary action, or for symptoms of *irritation of the motor, sensitive*, and *vasomotor* or nutritive nerve fibres of the spinal cord, or of the roots of its nerves; or, in other words, in cases of congestion, meningitis, myelitis, and cerebro-spinal meningitis.

Pain anywhere in the body is not properly a primary effect of Belladonna (Atropia) any more than of Opium (Morphine.)

Contraction of the bloodvessels of the spinal cord and brain correspond to painlessness in the parts supplied by the nerves having their origin in such locations.

Atropia causes *primarily* such conditions, but *secondarily* it causes congestion, and even inflammation, bringing with it pain, spasm, hyperæsthesia, etc.,—all the consequences of *irritation* of nerve-tissue.

In diseases of the brain I rarely find Atropia of service. If we use it at all, it must be used cautiously, and Belladonna is to be preferred in all but purely functional disturbances.

Certain it is that in *hemicrania, facial neuralgia, neuralgic cephalalgia,* and other very painful affections of the nerves of the head, the 2d c. trit. of Atropia is one of our most successful remedies.

In acute congestion, however, when the face is red, temples throbbing, eyes bloodshot, ears ringing, and wild delirium, who would dare to give any but the high attenuations of this drug or of Belladonna?

In *typhoid fever,* particularly typhus-cerebralis, when nightly delirium, spectral illusions, wild, uncontrollable laughter, obstinate insomnia, and often furious delirium and redness of the face occurs, the 6th of Atropia will often dissipate the troublesome symptoms, due in this case to *irritation of the brain from congestion.*

On the other hand, we meet with cases of advanced typhoid, where, with the general prostration, there is insomnia, with rambling, incoherent muttering, coma vigil, with picking at the clothes, very dry tongue, pale, cool face, etc., due to *cerebral anæmia with irritation.* Here we find Atropia 2d c. trit. an admirable remedy.

I will briefly enumerate the disorders in which Atropia has been found efficacious in our practice, when used in the 2d or 3d centesimal triturations:

Neuralgia, especially of the head, face, and eyes.

Gastralgia, purely neuralgic.

Enteralgia, a neuralgia of the abdominal nerves.

Nephralgia, neuralgic, or owing to passage of calculi. Violent, irresistible, and ineffectual urging to urinate, with agonizing tenesmus, both vesical and rectal.

Nocturnal enuresis, from paralysis of the sphincter.

Ovarian neuralgia, and *uterine colic.*

Vaginismus, when purely spasmodic and neuralgic (internally in the 6ˣ trit., and apply a cerate of gr. i to ʒj of simple cerate).

Whooping-cough, with violent paroxysms very frequent, and expectoration of very tough mucus.

Chorea, *tetanus*, and even *convulsions*.

I would advise you to carefully study not only the symptoms I have collated in "New Remedies," but the careful experiments recorded in the best allopathic works on toxicology. In Wood and Stillé you will find most of value.

AURUM ARSENIOSUM.

This new salt, combining as it does two most potent remedies, ought to become one of our most powerful agents against many destructive diseases and mental disorders.

I would recommend it for the following affections:

Suicidal mania, accompanied with great *fear* of death, *i. e.*, a powerful impulse to commit suicide owing to deep melancholy, but at the same time great fear and anxiety relating to death.

Chronic headaches due to *syphilis*, *necrosis*, *periostitis*, and *ozœna*, presenting a combination of the agonizing bone-pains of Gold with the intense neuralgic pains of Arsenic, especially after Iodide of potassa has failed.

Cancer of the face, nose, and uterus ought to come under its curative sphere. Also malignant diseases of the intestinal tract.

There is a large class of chronic diseases which seem to indicate both of these constituents, and we hesitate which to select. Here is a field for the application of this remedy.

It is best administered in the triturations from the 3ˣ to 6ˣ.

To Dr. Chrestien is due the credit of being the first to use a combination of Gold and Arsenic. . . . . Chrestien having treated phthisical patients with the Chloride of gold and Arsenic alternately, immediately discovered the similarity of their action. The first applications in France were made by Dr. Massart, who administered the Arseniate of gold in cancer and in phthisis, and who had the honor of seeing his remarkable work approved by the Sociétés de Médecine of Lyons and Toulouse.

Italian and American observations have established beyond a

doubt that diseases, such as lupus, depending upon scrofula, are rapidly ameliorated and ultimately cured by the Arseniate of gold. The first effect of the Arseniate of gold is a rapid increase of appetite. As Harless, Biet, and Cazenave have already remarked, the peristaltic contractions of the stomach and intestine are excited, and absorption occurs with greater rapidity. The Arseniate of gold then directly involves the nutrition of the anatomical elements, and consequently exercises a direct effect upon the different varieties of anæmia and chlorosis.

AURI ET SODII CHLORIDUM.

The proving of the Chloride of Gold and Sodium by Lembke, in Allen's "Encyclopedia," is very incomplete and unsatisfactory. It is the most active of all the preparations of Gold. In toxic doses it causes *violent gastro-enteritis, accompanied by cramps, convulsive trembling, insomnia, priapism, insensibility,* and other serious symptoms. In pathogenetic doses it causes *epigastric pain, nausea, loss of appetite,* and *constipation.* The constipation is peculiar, in that it is accompanied by an increased secretion of mucus from the intestinal glands. It is, therefore, homœopathic to *constipation with intestinal catarrh,* resembling in this respect Hydrastia.

I have found this preparation useful in the following:

Nervous dyspepsia, with melancholy, desire for death, a red, glazed tongue, pain in the stomach (left side) of a burning, drawing, pressing character, after eating, with tendency to diarrhœa after eating.

Gastric and duodenal catarrh, and in some cases of *jaundice* from catarrh of the gall-ducts, when the peculiar suicidal melancholy is present.

Syphilis, after abuse of Mercury, or when, during secondary or tertiary stages, the bones of the nose are affected, or the throat is ulcerated.

The action of Gold on the organs of generation is deepseated and prolonged. Its primary effect is to cause *congestive irritation of the uterus and ovaries,* resulting in *subacute metritis, ovaritis, profuse and premature menses, habitual abortion, nymphomania,* and even *ulceration of the uterus and endo-cervicitis.* It is, there-

fore, indicated in those affections in the sixth trituration and upward.

The secondary effects of Gold are to cause *atonic amenorrhœa, scanty and delaying menses, deficient sexual desire, sterility from ovarian torpor, ovarian dropsy*, etc. In my practice it has been successful in removing these conditions when given in the lowest triturations, 1ᵉ to 3ᵉ. I would recommend a trial of it in cases of *puerperal mania with sexual excitement, ovaritis, gastro-intestinal irritation*, and *suicidal impulses.*

In men Gold causes corresponding conditions, and is useful primarily (in the smallest doses) in *sexual erethism from plethora, seminal emissions with vivid dreams, strong erections*, etc.; and, secondarily, in larger doses (2ˣ to 3ˣ, three times a day), in *decline of the sexual power, diurnal seminal losses or nightly emissions with feeble erections and no dreams, impotence from weak, inefficient erections, irritability of the sexual organs*, and *premature emission of semen.*

Its action is just the opposite of Bromide of potassium, and it is useful in minute doses when the former is indicated in large, and *vice versa.* An efficient formula for its administration is gr. j of the Gold to ℥j aqua dest. Dose 5 drops.

The melancholy, suicidal mania and hypochondria of Gold is probably due to *cerebral anæmia*, as the *vertigo*, and should be treated with low triturations, for they are secondary effects. Gold causes primarily excessive *intracranial blood-pressure* (hyperæmia), and aggravation will follow the use of any potency below the third.

In some cases of *dropsy* from *chronic Bright's disease* Muriate of gold will act promptly in removing the œdema, by causing profuse flow of urine. (See Burnett's recent Monograph on Gold, Hom. Pub. Co., London, 1879.)

BADIAGA FLUVIATILIS.

The provings of this medicine appeared in the "Hahnemannian Monthly," and also in Hering's "Materia Medica," but no clinical use of it has since been reported. I am not able, therefore, to give any additional information relative to its curative value. I have never used it myself. Many of its symptoms closely resemble those of the marine *sponge* which we use in practice.

The *head symptoms* would indicate its probable value in some cases of *headache*, and "tetterlike eruptions on the scalp."

It causes painfulness of the left eyeball, especially the posterior portion, and Dr. Bedford says he has had very good results from its use in "*scrofulous inflammation of the eyes*, with hardening and induration of the Meibomian glands."

Hahnemann considered it an antipsoric, but never published any account of it. It contains Carbonate of lime, Silicea, Phosphate of lime, and a trace of Alumina, which would make it an antipsoric in the sense Hahnemann used the word. Hering says of it: "A comparison with Spongia, its nearest of kin in the animal kingdom, will show striking similarities and remarkable differences."

He also compares it with Silicea and Clematis. Rosenstein considers it complementary to Sulph., Iodine, and Mercurius. This last writer reported a complete cure of a *chronic syphilitic bubo* with Badiaga, after Sulph., Carbo, Clemat., Sil., Iod., and Ars. had been given in vain.

Among the new indigenous remedies its analogues are Phytolacca, Corydalis, and Stillingia.

Hering thinks the Badiaga will be useful for the complaints of adults who had scrofulous complaints in childhood, and which showed again in after life. He adds that it had a reputation in Russia for the cure of *hæmorrhoids*. He thinks it follows well after Lachesis.

I doubt if it will be used much, for we have many similar and more active remedies. It may, however, meet special cases when its analogues fail.

Its *heart-symptoms* are peculiar, and are worthy of attention.

BALSAMUM PERUVIANUM.

The scientific name of this tree is *Myrospermum Peruiferum*; the substance used is the resinous juice which exudes from the tree when cut. It is strange that this agent should be now nearly obsolete with the allopathic school, for when it was first intro-

duced into Europe by the Spanish Jesuits it was lauded as highly for the cure of consumption and kindred complaints as is now the cod-liver oil. It remains for homœopathy to take up these neglected medicines and make of them valuable curative agents.

Although no systematic provings have been made of it, we know enough of it to assert that it is an analogue of Copaiva, Cubeba, Chimaphila, Stannum, Thuja, and Uva ursi.

Its sphere of action is upon the *mucous membranes*, especially those of the respiratory tract. Its special indication is for *muco-purulent discharges—yellow, green, and fetid.* The pathological condition calling for its use is doubtless *torpid indolent ulceration*, or *purulent catarrh.*

For many years I have made extensive use of this balsam, and have seen most gratifying results in the following affections:

Chronic, purulent, fetid anterior or posterior nasal catarrh, with or without ulceration.

Coughs, with copious expectoration of thick, yellow, green, and fetid pus.

This condition occurs commonly in old people, and scrofulous subjects, and may arise from *laryngitis* or *bronchitis*, or neglected catarrh of those organs. It will not cure *tubercular* phthisis, but may act as a useful palliative.

My usual dose is the 1st or 2^x dilution, or trituration of the crude balsam. (It seems to act best in trituration.) But I do not confine myself to its internal administration. The most brilliant results are obtained from its inhalation by means of the steam atomizer. By this means the finely divided atoms come in direct contact with the diseased surface. If triturated with equal parts of Carbonate of magnesia and sugar, or pulverized Glycyrrhiza, it will mix with water, otherwise it clogs the instrument. Make of the 1^x trit., thus prepared, a solution representing in strength the 2^x dil., and have its spray inhaled three times a day, each inhalation lasting for five minutes.

Dr. Hoffman, in some French homœopathic journal, reports as to his use of the balsam. He praises it highly in cases of

Cough after pneumonia, when it is loose, thick, yellow, and fetid (one-tenth dil.); also in

Suppression of the accustomed expectoration in bronchial affections. (6th dil.)

(In very large doses the Bal. Peru. has been known to check copious expectoration, but with resulting fever, dry cough, and oppression, a primary effect of the drug.)

Hoffman says: "I have seen persons laboring under perfectly formed phthisis, and seriously affected for several years, happily restored by the use of the balsam."

I doubt if these persons had tuberculous phthisis. They may have had *vomicæ*, for there are many authenticated cases of *vomicæ*, with *offensive* expectoration, cured by this balsam.

It formerly had a high reputation for

Hectic fever, which it doubtless cured by removing the suppuration upon which it depended.

Not only in purulent discharges from the bronchia is it useful, but I have cured cases of *gastric catarrh with obstinate vomiting of food mixed with mucus, chronic mucous catarrh of the bowels* (sometimes called chronic dysentery), *catarrh of the bladder*, and even obstinate *leucorrhœa*, uterine and vaginal, in which last disease I advise injections of the Aqua bal. Peru., such as above recommended for inhalation.

A *cerate* of the balsam is the best application, next to Glycerole de aloes, for *indolent ulcers, cracked nipples*, cracks in the fingers and palmar surfaces of the hands, or fissured and chapped lips.

It is said that the most inveterate case of *itch* is cured promptly by one application of the pure balsam, warmed and rubbed all over the surface of the affected skin.

BAPTISIA TINCTORIA.

This indigenous plant has proved to be one of the most valuable additions to our Materia Medica. It has become an indispensable agent in the treatment of adynamic fevers and similar disorders.

There are thirteen *species* in the United States, and all of them probably have similar medicinal action. I have used—besides the officinal species—the B. *australis* (blue-flowered), B. *leucophœa* (cream-colored flowers), and B. *leucantha* (white-flowered),

and can see no difference in medicinal effects and but little in smell or taste. All the above grow in the Northern States. In the Southern States some very large species grow, which ought to be equally if not more potent.

Although this remedy covers many grave and important morbid conditions, it has not a very wide range of action. It seems to affect principally the *blood*, impairing its integrity, the nervous system, which it deprives of its normal tonicity, and the mucous surface, which under its influence ulcerates and takes on inflammatory action, with a decided tendency to unhealthy, fetid discharge.

It was first used empirically in typhoid and typhus fever, in which its popularity is still very wide and well deserved. It was for a time supposed that its use was called for in all stages of the malady, but more recent observations seem to prove that its period of greatest usefulness is during the *premonitory and first stage of all fevers of an adynamic type.*

The testimony is too large and authoritative to be set aside that it possesses a real abortive or preventive power over such fevers, if given at the proper time. Numerous observations and experiments, both in England and this country, have shown conclusively that if prescribed for the following characteristic conditions and symptoms it will arrest the disease which, but for its influence, would end in the typhoid state:

A *condition* of great prostration, when typhous epidemics abound, at any season of the year.

General *malaise*, with a feeling as if one had been bruised all over; cannot lie on either side long because the part on which he is lying becomes sore; pressure on any part of the body soon causes soreness.

The extremities feel too large, tremulous, with "thrilling" sensations in them.

General fetid odor from the body, the breath, and all the excretions.

General *heat*, with very dry, red, or brown, parched tongue, and dry throat.

Head heavy, confused, internally sore, with a feeling like that preceding delirium. "An illusion, as if he was several persons,

and he tries to get himself together." (Bell.) Stupor, incoherent raving.

The Baptisia is infinitely superior to Aconite, Gelseminum, or Verat. viride in all fevers having a typhoid tendency, while it is nearly useless in the so-called "synochal" fever. The condition is one of *erethism* rather than *inflammation*, the pulse rarely goes above 100, and the skin is not as hot and dry as in true febrile conditions.

The lowest dilutions, or mother tincture, have generally been most successful in the treatment of typhoids. I prefer the tincture made from the fresh root, one part to nine of alcohol, by weight. Ten or fifteen drops of this preparation in four ounces of water, a spoonful every one, two, or three hours, until a decidedly favorable change occurs or the symptoms call for Bryonia, Rhus, Arsenicum, Phosphoric acid, or Terebinth.

Not only in the beginning of typhoid fever is the Baptisia indicated, but in *all similar conditions*, whether occurring idiopathically or during the progress of any other disease. For example: If, during the progress of scarlatina, small-pox, pneumonia, bilious fever, dysentery, or puerperal fever, the above symptoms, characteristic of this remedy, appear, a few doses will generally dissipate them, and either restore the patient to convalescence or allow the original disease to pursue its normal course.

Its action on the cerebro-spinal nervous system is of such a depressing character that it led me to suggest it as a probable remedy for "spotted fever" as far back as 1864. Recent observations of its good effects in *cerebro-spinal meningitis*, by Dr. Searle and others, as well as myself, have proven that in the *typhoid* variety of the disease it is nearly a specific. It is useful when a condition of general paralysis threatens, the excretions all become offensive, and the blood rapidly tends to disorganization. It may have to be alternated with Gelseminum, Secale, or Calabar, as it rarely succeeds alone in averting that terrible malady.

Taking the one symptom, "putrid odor of the discharges, with dark red or ulcerated mucous membrane," I have used it extensively in *chronic sore mouth, whether mercurial or cachectic, in malignant dysentery or diarrhœa, offensive leucorrhœa or lochia*, and even *offensive ulcers on the skin*. I prescribe it as a topical ap-

plication as well as internally. It appears to resemble, in its topical effect, Chlorate of potassa and Carbolic acid. In *putrid angina* and *diphtheria* it aids the action of Ars. iod., Phyto., and Merc. cyanate. One drachm of the tincture to four ounces of water makes an efficient gargle in such cases.

One peculiar symptom indicates Baptisia in some sore throats. The throat may look dark purple, livid, and *as if* very painful, but it is *not*. Dr. Miner cured an inveterate sore throat which was *not painful* (with the 30th).

There are two gastric symptoms of Baptisia which are worthy of notice, namely:

(1.) "Gone, empty feeling at the stomach."

This symptom is readily removed by Baptisia when it is the result of anxiety, grief, night-watching, or fasting, *provided the breath is fetid and the tongue dry*. If *not*, then Ignatia or Caladium is more appropriate. Dr. —— reports a case of "dyspepsia after typhus," presenting "sinking at the stomach, frequent fainting, brown, dry tongue," etc., cured promptly by Baptisia.

(2.) "Nausea, with want of appetite, and constant *desire for water*."

In the beginning of fever this is often a prominent symptom, and may be removed, with all of its concomitants, by this remedy.

The abdominal symptoms are not peculiar, but Dr. Hart reports a case which he believes to be *abdominal neuralgia*, which he cured with Baptisia. The symptoms were: "Extreme uneasiness rather than pain; a sensation as of something crawling about in the abdomen. The paroxysms occurred after midnight, with throbbing and congestion of the bowels, vomiting, purging, and great prostration. The pulse, at first accelerated, became slow, weak, and often imperceptible."

My experience with Baptisia in bowel affections leads me to esteem it highly in all cases of *adynamic or typhoid diarrhœa and dysentery*, when dependent on an epidemic typhoid miasm, or the result of local septic conditions. If the miasm be *malarial* (ague poison) it is of small value as compared with Arsenicum, China, Eucalyptus, or Gelseminum.

The evacuations indicating Baptisia are usually *dark*, black, or brown, watery, murky, slimy, bloody, and always particularly

offensive. If, with these appearances, you find a dry tongue, fetid breath, sinking at the stomach, and other characteristic symptoms of this medicine, it will prove a prompt remedy. I prefer the 1ˣ or 2ˣ dilution.

It has rarely been recommended in diseases of the urinary and genital organs, but there is one condition in which it is specific, namely, in *threatened miscarriage* from mental depression, shock of bad news, watching and fasting, or from low fever. I have often prevented miscarriage by its timely use. In case of *death of the fœtus in utero,* the mother often falls into a condition in which the "dreadful sinking at the stomach," fetid breath, dry, brown tongue, and great prostration, with or without fetid vaginal discharge, are the prominent symptoms. Here the Baptisia acts well, preventing blood-poisoning, and aiding Caulophyllum or Ergot in expelling the decaying substance.

As an important addenda to my lecture on Baptisia I will give the following excellent comparisons of that drug with Rhus, Arnica, and Muriatic acid, by Dr. E. A. Farrington, of Philadelphia:

BAPTISIA.	RHUS TOX.
Anxious, certain of death.	Faint, timid, fear of death.
Delirium constant, low; *thinks her head is scattered over the bed, and that she must toss about to get the pieces together.*	Delirium mild, low; *thinks that he is roaming over fields, swimming, or engaged in some other physical work.*
While answering a question, goes to sleep.	Answers correctly, but in a hasty manner.
Mentally restless, yet too lifeless to move; confused as if drunk.	Mentally restless; slow flow of ideas; *better moving.*
Feels as if the top of the head would fly off.	Feels as if a board were bound across the forehead.
Expression besotted; cheeks yellow, with a deep central flush.	*Expression listless;* or anxious appearance; cheeks dark red.
Teeth covered with sordes; mouth full of *ulcers, fetid* breath, aphthæ.	Teeth and mouth covered with *thick, hard, brown mucus; vesicles.*
Jaws rigid; pain.	Jaws crack; feel stiff.
Tongue white, dry, yellow centre (early stages typhus).	Tongue white on one side, dry (early stages typhus).
Tongue dry, dark red, shining, cracked, *ulcerated;* or, dry, with *a brown streak down the centre,* edges clean, red.	Tongue dry, hard as a board, *hardened, dirty phlegm;* or, *red triangular tip,* cracked, shows imprints of teeth.
Saliva viscid, thick.	Saliva bloody, *runs out in sleep.*

BAPTISIA.	RHUS TOX.
Dry mouth, great thirst; spits out the liquid put into his mouth.	Dry mouth, unquenchable thirst; repugnance to either food or drink.
Uvula long; mucus in the throat, cannot raise or swallow it; *can only swallow liquids.* Putrid, *painless,* dark ulcers.*	Throat sore as if strained; swallowing difficult from paralyzed epiglottis, œsophagitis, cannot swallow solid food.
Stool yellow, involuntary, *horribly fetid;* sour belchings.	Stool yellow, slimy, involuntary at night, *almost no* fetor; empty belchings.
Dysentery, great tenesmus with *discharge of pure blood, no mucus.*	Dysentery, tenesmus, discharge of *transparent lumps of mucus.*
Urine alkaline, *offensive,* dark red.	Urine albuminous; *involuntary* at night.
Cannot draw a full breath, gasping; tightness across the chest.	Difficult breathing referred to the lower chest and pit of stomach.
Heart throbs audibly; seems to fill the chest.	Heart beats feebly; *trembling* about the heart.
Pulse *full,* whether hard, slow, or quick; variable, threadlike.	Pulse small, *weak* and quick, weak and small, threadlike.
Cannot lie long anywhere; *yet motion is painful.*	Cannot remain quiet; *motion of the limbs improves.*†
Must change position, *the bed feels so hard.*	Must change to relieve *the pains in the limbs.*
Feels as if *sinking away;* lies with the head thrown back; jaw dropped; sliding down in bed; putrid breath.	Feels as if paralysis were coming on; mouth open; lies as if intoxicated; involuntary stool and urine.‡

* The painlessness may decide for Baptisia not only in typhus, but in scarlatina, putrid sore throat, etc., when the suspicious odor and general weakness offer a dangerous reason for the absence of pain. The ability to swallow only liquids distinguishes it from Lach., Apis, Canth. Rhus tox. has not so marked a tendency towards putrid ulcers. In œsophageal spasm both can only swallow liquids; but with Baptisia solids simply cause gagging; with Rhus vomiting.

† Rhus, in the beginning of typhus during profound weakness, has an exceptional symptom: *wants to lie still in one spot.*

‡ It would be premature to characterize Baptisia while so imperfectly proved. But in general it shows a heavy besotted face; fetid breath, stool, and urine; dyspnœa from weakness; in the beginning, *nervous restlessness.* Rhus shows a bland expression, pale waxy skin; hepatization of lower lobes (hence dyspnœa is referred to the stomach and hypochondria); in the beginning, *erethism* (hence the nose bleeds, *which relieves*).

BAPTISIA.	ARNICA.*
Anxious, certain of death.	Indifference.
Falls asleep in the midst of his answer.	*Falls asleep, forgetting the words for his answer.*
Lies with head thrown back, lower jaw dropped; slides down in bed.	Lies quiet, *no complaints; says he is well;* lower lip trembles.
Vertigo, worse stooping.	Vertigo raising the head.
Gasping; breathing as if he could not draw a long breath.	Loud, blowing inspiration and expiration in sleep.
Can swallow only liquids; spits out the water taken.	Pharynx seems "lame;" a gurgling noise when swallowing.
Stool involuntary, fetid.	*Stool and urine involuntary.*
Pulse *full* and slow; variable.	Pulse frequent, sunken.
Nervous symptoms predominant.	Stupefaction from the very beginning.

BAPTISIA.	MURIATIC ACID.
Goes to sleep while answering.	*Forgets what he has said.*
Delirium; cannot sleep, because *she must toss about to get the pieces of her head together.*	Delirium; would sleep but cannot; vivid hallucinations of changing images from past to present.
Soreness as if in the frontal brain; wild feeling.	*Brain feels sore, as if it was torn or had been beaten.*
Senses generally blunt; *besotted, heavy expression.*	Senses generally too acute; *distant talking gives headache.*
Dull hearing during and after typhus.	Dull hearing, with dryness of ears, or dark wax.
Cheeks *dark red,* yellow ground.	Circumscribed *glowing red cheeks.*
Aphthæ putrid, dark, ulcerating; thick, viscid saliva.	*Aphthæ putrid, small, bluish, deep.*
Tongue dry, *brown down the centre;* feels numb or scalded.	*Tongue small, bluish or rattling like leather; heavy, as if paralyzed.*
Goneness; sinking at the stomach.	Emptiness all over the abdomen.
Stool involuntary, *putrid;* occasional diarrhœa or costive (beginning).	Involuntary *while urinating;* putrid; during crisis, papescent stool relieves.
Urine *offensive,* alkaline.	Urine acid; *difficult to expel.*
Heart-beats seem to fill the chest.	Heart-beats seem to be felt in the face.
Pulse full and slow; variable; thread-like.	Pulse irritated, but without energy; *omits every third beat.*
Slides down in bed; lower jaw dropped; *putrid breath.*	*Slides down in bed; lower jaw hanging; moaning.*

* Arnica has but little resemblance in the beginning of typhus; but when stupor and petechiæ appear we find in common such symptoms as: must move, the bed feels so hard; brown tongue; putrid breath; goes to sleep while answering, stupid, heavy look, etc.

BAPTISIA.	MURIATIC ACID.
Scarlatina with *dark, fetid ulcers in the throat;* great prostration; petechiæ; stupor.	Scarlatina with *blue feet; dark bluish fauces; scanty eruption; sudden red face; petechiæ; stupor.*
Stupor resembling that of Arnica and Opium.	Stupor and nervous weakness after Rhus and Bry. fail.

BAROSMA CRENATA.

It often happens that a drug suffers in reputation from the company it keeps. So with the Buchu. It was taken up by an unprincipled adventurer and its fair fame prostituted to the vilest purposes. Previously it had been quite largely and successfully used by the allopathic school as a remedy in abnormal discharges from the urinary organs.

Its sphere of action seems to include the kidneys and mucous surfaces of the urinary organs principally. It has also a specific action on all mucous membranes, especially when brought in contact with them topically.

We should not reject it because it lacks a proving, or because it has been improperly used.

It is in *chronic* diseases of the urino-genital organs, when characterized by *muco-purulent* discharges, that the Buchu seems to act best. I have made some notable cures of such cases when the urinary deposit showed an abundance of epithelium mixed with pus- and mucus-corpuscles.

"Chronic inflammation of the pelvis of the kidneys and mucous membrane of the bladder, with copious discharge of mucus," is mentioned by several authors as curative by this remedy.

Irritable bladder, with vesical catarrh, or gravel (*Lithic acid calculi*), complicated with spasmodic stricture of the urethra or sphincter, has, in my practice, rapidly disappeared under the use of the Barosma.

Prostatic disorders have been cured by this remedy when the general conditions coincided (compare Populus, Copaiva, and Thuja).

Certain varieties of *dropsy* have been cured by Buchu, but the cases reported have not been characterized by any peculiar symptoms.

I have cured several cases of *vaginal leucorrhœa* with this medicine, prescribing it by enema (fl. ʒj to ʒiv) as well as internally.

Dr. Stillé, in his "Materia Medica," recommends it as a specific for "undue secretion from the mucous follicles of the urethra, the vesiculæ seminales, or prostate, produced by excessive venery or self-pollution." (I have verified this several times.)

It seems to act best in the lowest dilutions, and in some cases a weak infusion cures with surprising promptness.

BELLIS PERENNIS.

In Dr. Thomas's additions to "Homœopathic Materia Medica" (London, 1868) is a proving of this plant. He recommends it as a substitute for Arnica. He thinks it will prove a specific for *boils, bruises, sprains, whitlows*, etc., used topically and internally. We have a Daisy (B. integrifolia) indigenous to the United States. It probably has the same properties. I have had no personal experience with either.

BENZOATE OF AMMONIA.

This preparation was first recommended by Dr. Todd as the best remedy in *dropsy after scarlet fever*. The symptoms indicating its use do not differ from those laid down by Hering and Kitchen as calling for Benzoic acid, namely:

"Very scanty, dark-red, bloody-looking urine, with strong, pungent odor, and red, thick sediment."

It is indicated, also, by "scanty, dark, smoky-looking urine," such as we find in albuminuria dropsy in children.

If this kind of urine occurs in *rheumatic* or *gouty* affections, this drug is just as well indicated, and will promptly remove the disease.

Dr. Seymour recommends it highly in gout, when the small joints are red and swollen, or when fluid is deposited in the joints of the great toe; also in cases when the Lithate of soda existed in the joints of the fingers (gouty concretions).

I have had excellent success with it in *rheumatism*. (The Benzoate of potassa will act more satisfactorily in some cases.)

In that form of *jaundice* arising from *arrest of secretion of bile*, and *not* from obstruction, the Benzoates or Benzoic acid is often a specific, especially when the urine is similar to that above mentioned.

I believe these preparations are preferable to the Benzoic acid, because of their ready solubility. The 1ˣ triturations for adults, and 2ˣ for children, have succeeded best in my practice.

Dr. McAffee, of Mt. Carroll, Ill., writes me he has used this preparation successfully in many cases of dropsy from disease of the liver.

BENZOATE OF LITHIA.

Dr. T. O. Summers says: "In our hands Benzoate of lithia has often a most magical effect in diminishing the uric acid deposits, and increasing the free hippuric acid of the urine. It will thus be seen that this agent acts in a manner entirely different from the alkalies in the cure of uric acid deposits. Benzoate of lithia acts upon the urine before it leaves the blood, converting the uric acid which would otherwise be deposited into hippuric acid, a harmless agent, which passes off in solution, leaving no ill effects. The alkalies do not act in this way. They dissolve the uric acid directly after it has left the blood. Hence, while they are clearly indicated in those cases in which the acidity of the urine is so great as to produce irritability of the bladder, or any part of the genito-urinary apparatus, it is clear that they cannot change the lithic acid diathesis—an end which we may hope to attain according to the rationale of the Benzoate of lithia action."—"Nashville Journal of Medicine and Surgery."

BERBERIS AQUIFOLIUM.

This unproven remedy is being used a good deal on the Pacific Slope, and latterly in the East. I doubt if it comes up to the expectations of its friends. Dr. Bundy, of California, writes of it:

"In the introduction of this new drug to the profession I must say that, as a shrub, it is one of considerable beauty, and is on this account cultivated in our California gardens, and can be found at most of our florists, who find a large sale for it as a flowering

shrub. It belongs to the natural order Berberidaceæ, an order which, on this coast, is made up of three genera—Berberis, Vancouveria, and Achlys. The genus under consideration is the Berberis. Of this genus there are four species—Berberis repens, Aquifolium, Pinnata, and Nervosa. The species Aquifolium inhabits the Coast Range Mountains, and is found to delight in a high altitude, being more plenty there than lower down.

"It was first brought to my notice by a gentleman who had been suffering for years from *syphilis*, and who, himself, was a 'walking drug store,' as he expressed it, and had made the mountains a resort that he might live through summer; and, while there, when very weak and low, just able to wait upon himself, he picked some of the berries, ate them, relishing them because they were sour, and they finally acted as a cathartic, and, having been much constipated, he received immediate relief. He tasted the leaves, bark, and also dug the root, which he found to be an intense bitter, steeped it, and began to take it. In three months he found himself wonderfully restored, and came home to this place (Colusa). He continued the use of the drug by steeping in whiskey, as he called it, and in eight months every vestige of the syphilis was gone, and he was certainly (to use a vulgar term) almost rotten with it, and that was his cure. Having treated him myself more or less for a year before he commenced its use, and being intimate friends, he gave the above statements regarding the remedy as he used it, but not until lately have I been able to obtain its botanical name, though I have used it months without knowing what it was, or I should have presented it before. Its power as an alterative is certainly marvellous, and not only as an alterative but a tonic also. The root is the part used, and it is extremely hard and tough, and of a bright, golden yellow color, an intense but pleasant bitter, and makes a very handsome preparation. As a tonic, and a *general* tonic, I know of nothing that can excel it, and I find it also to be an effective antiperiodic. Combining, as it does, its great alterative properties with its fine tonic power, its great value as an alterative is increased; for where an alterative is desirable a tonic is always needed. Since learning of this drug's great antisyphilitic power, I prescribe but very little of the iodides, from the fact of this so far outdoing them in syphilis. I do not care what

the disordered state of the blood may be, requiring an alterative or tonic, you will find in this the power of renovation and innervation that will give perfect satisfaction, as it will bring the answer faithfully. I have just commenced its use in a case of salt rheum, and as the patient has only been taking it two weeks I do not know what the result will be, but it does renovate the system so thoroughly in syphilis and other blood diseases that I believe it will succeed in this case. I will report further in this case after trial. I might report very many cases of syphilis, together with other blood difficulties, which are ordinarily met with, that I have cured, and I don't think of using much else."

There is considerable enthusiastic testimony for its value in *syphilis*, but unfortunately it was nearly always combined with Iodide of potassa, which renders such testimony very doubtful. The following cases of *psoriasis*, where it was used alone, are of more value:

CASE 1.—In October last a Mr. Hall, native of London, England, about aged thirty, and body well nourished, presented himself to me with typical psoriasis diffusa, involving the entire integument excepting that of parts of the face, hands, and feet. It was his second attack, and had then troubled him three or four months, growing gradually worse in that time.

During his first attack some years ago, being unsuccessful with any treatment in Canada, where he then lived, he went to London, England, and under the treatment of Balmanno Squire, Surgeon to the British Hospital for Diseases of the Skin, which he says consisted of baths, and ointments, and internal treatment, the composition of which he does not very well remember, he pretty soon got well, and so remained until the present recurrence.

After calling on me in October last, and pending his efforts to get into some hospital where he could avail himself of, what I supposed to be necessary, baths and treatment, he met with Mr. Higgins, of this city, and was induced by him to try Berberis aquifolium, which he did in teaspoonful doses of the tincture four times a day.

Improving remarkably in a short time, he and Mr. Higgins

called at my office and wished me, if I felt any interest in it, to superintend the treatment and watch the progress.

Struck with so much change without any external macerations or anointings I was glad to watch it still further.

Soon after commencing the treatment he frequently felt a warm tingling sensation in the skin, and while exfoliation of scales went on, the production of them gradually ceased. The psoriatic patches left the trunk first, the head next, and next the arms. There are a few scales yet in front of the knees, but excepting those he is entirely well. The red discoloration which remained for some time on the trunk has lately entirely disappeared.

I have allowed myself to report the case, not from any special interest that the affection possessed, but from its disappearance during the administration of this medicine. I exercised particular care on every hand to ascertain if any other medication was had, and believe it to be the only remedy used. The patient has also told me, from time to time, that he made no change in diet or any of his habits of life. He says the medicine may have increased the action of the bowels somewhat, but not very perceptibly. In conjecturing as to its *modus operandi*, I have thought sometimes that it may act upon the bowels and other emunctories, and from its bitter principle, as a tonic, and in that way correct defective elimination and mal-assimilation, upon which this affection with many others may probably enough depend.—Dr. T. N. Reynolds, in the "Michigan Medical News."

As there has been some little questioning of the authenticity of the above case, reported in our April issue, of the wonderful effects of Berberis aquifolium, we took the liberty to ask for a brief statement from the patient, Mr. Hall. This is what he writes us:

"SIR,—I think that I am in duty bound to bear testimony to the virtues of Berberis aquifolium, having received almost miraculous benefits from it in psoriasis. I have been troubled for the past six or seven years, and believe there could not be found in Michigan a finer developed specimen than mine, being completely covered from head to foot with those charming incrustations.

"The only ill effect that I felt was my inability to work at my trade as a machinist. It never was irritable, but the fact of its being there almost drove me crazy. I went to England, and at-

tended the Royal Hospital for Skin Diseases about three months. The chief thing administered was Fowler's Solution, and in about six months got better. Was well for about one year, when again it made its appearance in a worse form, and I was induced to try Berberis aquifolium. I had an 8-ounce bottle, and at the outset I experienced a tingling sensation of the skin, which lasted for some time, and then found the exfoliation gradually getting less and less. After taking the Berberis about six weeks in teaspoonful doses, four times a day, it ceased to form, and the red discoloration gradually disappeared. There is only one obstinate patch, about the size of a 2-cent piece, on my knee, but that does not form any scales, and gives me no inconvenience. If you think proper you can publish this statement. I can produce half a dozen medical gentlemen that saw me before taking the Berberis, and I was indeed a picture of misery. I never deviated from my regular course of diet and cannot ascribe the cure to anything else but Berberis."—"New Preparations."

CASE 2.—On the first of November, 1877, Mr. W. D., of this place, called me to see his two little daughters, aged respectively ten and twelve years, whom I found suffering from a terrible eruption covering the scalp and extending downwards over the face and chest. I was told by the mother that, in spite of all she could do, the disease had existed over two years, and the mother, by the way, is a very neat housewife. She said she had used all the domestic remedies she could procure, but the disease had now become so bad and the odor so offensive that she was compelled to take them from school. To make the story short, I diagnosed the disease scrofula, and prescribed the following:

℞. Fluid extract berberis,
Syrup simplex, āā, ... ℥iv.
M. S. Teaspoonful every four hours.

The first effect was to increase the eruption, but in four weeks from the time they commenced the use of the medicine the eruption had entirely disappeared, leaving the skin smooth and healthy.

My third case was a young lady whose family had all shown scrofulous symptoms, some of whom had died of the disease. The lady referred to had been troubled with an eruption confined to

the ears and back of the head and neck of six months' standing. One eight ounce bottle of Fluid extract of berberis aquifolium, prepared according to the above-mentioned formula, and taken in teaspoonful doses, effected the cure.—Dr. Mallory, Ohio.

Dr. Buisly makes the following emphatic remarks concerning its use in skin diseases:

"If you wish to smooth the skin of a lady's face, which has become rough and unsightly, give her Berberis and she will give you many a puff, together with thanks," etc.

If experience of our school confirms the above, by means of its use *alone* and in smaller doses, it will prove that it is an analogue of Phytolacca, Stillingia, Corydalis, and the Mercurial iodides, and Arsenic.

BISMUTH.

This is a very old remedy in one sense, but very new in another. Teste introduced it into his "Materia Medica" with the remark that it "is very little known to homœopathic physicians." The same remark applies almost equally well now, for the great majority of our school rarely use it; only those who have been allopaths, or have gained some knowledge of its value from allopathic text-books.

Bismuth is a very important remedy in its sphere of action, but that sphere is narrow, and confined to the *nerves of the stomach* and those organs in special sympathy with it.

Hahnemann published a few symptoms of the Oxide of bismuth in his "Materia Medica Pura," but they have attracted little attention. Teste tried to call attention to it, but he absurdly linked it with a group of medicines to which it has but slight resemblance. His clinical observations were from allopathic experience mainly, and his own personal experience with it was quite fanciful and unreliable.

My experience with it has been large enough to warrant me in speaking decidedly as to its value.

I have found it of the greatest use in *painful digestion*, or a kind of *gastralgia* which comes on *soon after eating*. The pain is peculiar; it is a *remittent pressure, as from a stone or some heavy substance in the stomach*. Some describe it as a *crampy* pain, others

a *griping*. It differs from the gastralgia of Nux, which comes on later after eating; from Carbo veg., which is still later, as well as *burning*. The only medicines which closely resemble it, in the nature of the pain, are Dioscorea and Calabar.

This *gastralgia* of Bismuth is often attended with eructations, tasting of undigested roast meat, frontal headache, vomiting of undigested food; but these are not necessary concomitants.

In *vomiting from gastric irritation* it is an excellent remedy. The vomiting is not attended by fever, is generally chronic, or has followed acute gastritis, or has been caused by irritating drugs. It is not useful in vomiting of sour, ropy fluids, or when inflammation is present. It will often palliate the vomiting from cancer, or ulcer of the stomach; also the vomiting of pregnancy, when the *reflex* has caused *local* irritation of the stomach.

Of Teste's observations the only trustworthy one is, that Bismuth is indicated in "absence of fever, nidorous (roasted-meat smelling) eructations, mucous or brownish, foul-smelling vomiting; small, serous, intermittent diarrhœa, stools of a light color and foul odor, preceded by crampy pains at the stomach, and pinching in the abdomen."

In the *diarrhœa of infants*, when teething, if they have the above symptoms the Bismuth is a specific. If the diarrhœa occurs in poorly nourished adults, or feeble persons with slow digestion, it will act admirably.

In *headache* it is an excellent remedy when it alternates with or is attended by the gastralgia, or when it comes on immediately after eating, and is relieved by vomiting of the ingesta. The pain is generally *frontal*.

In the treatment of *dyspepsia* or painful digestion, not complicated with any liver affection, it is almost indispensable. I have been very successful with it aided by *Pepsin*, which is peculiarly adapted to assist Bismuth in its curative action. I do not approve of those quackish combinations of "Bismuth, Iron, Strychnine, and Pepsin," with which the country is flooded. Pepsin will not combine properly, in solution, with any drug. It should be given uncombined. My plan is to give the Bismuth, if indicated, just before eating, and the Pepsin with the last portion of the food

taken at meals, followed by the Bismuth again in half an hour, if the *pain* and distress come on.

I usually use in all cases the first decimal trituration of the *subnitrate of bismuth*, giving to adults ten to twenty grains, to children five or ten grains. I do not hesitate to give the same quantity of the crude medicine in obstinate cases. If the preparation is chemically pure no aggravation can possibly accrue from its use. When it is given for the *vomiting and diarrhœa* of children, the same plan, namely, a dose just before nursing or taking the bottle, with or without the Pepsin after.

You will find recorded in Hempel's "Materia Medica," also in Orfila "On Poisons," some cases of alleged poisoning from Bismuth, but it is now ascertained beyond a doubt that it is only when *Arsenic* is combined with Bismuth that it has unpleasant effects. "Notwithstanding all the care of modern pharmacy," says Wood, "Bismuth even yet contains Arsenic, and I have seen it from this cause produce bloody purging."

You should be careful, then, that you procure a pure article. I do not mean to infer that the chemically pure Bismuth will not *cause* diseased conditions similar to those it will cure, for such an assertion would contravene our law of cure. I do say, however, that only its long-continued use, in large doses, could produce such effects by slowly deranging the gastric nerves.

Its primary effect is, doubtless, to benumb and abolish the normal sensitiveness of the nerves of the stomach and intestines, while its secondary effects would be to cure just that hypersensitiveness which results in the gastralgia, which it is so successful in curing.

BISULPHIDE OF CARBON.

This drug was once used to some extent by the allopathic school, and was found quite useful in many diseases, but it has gradually fallen into disuse, more on account of its intolerably fetid odor, probably, than from any deficiency of curative power.

It was employed in obstinate rheumatic and arthritic affections, paralysis and cutaneous eruptions, and as a resolvent in indolent tumors. In the latter case a few drops were applied to the tumor several times a day. A Dr. Otto claims to have reduced a stran-

gulated hernia by applying a few drops. The vapor was said to cause the disappearance of indurated lymphatic glands, also in deafness from want of nervous energy. It was recommended to be rubbed on the face in neuralgia, toothache, etc.

Workmen exposed to its fumes are affected with headache, vertigo, and overexcitement of the nervous system, as evinced by voluble talking, incoherent singing, immoderate laughter, or weeping.

A long continuance of exposure causes a kind of cachexia, characterized by general weakness, loss of sexual appetite, dulness of sight and hearing, and loss of memory.

It does not seem to cause any lesion of the brain (in rabbits killed by its fumes), but only congestion of the lungs.

From the symptoms caused by it in workmen I would suggest its use, by inhalation, in some cases of *hysteria*. Its odor, if nothing else, would help to dissipate the peculiar abnormal condition of the nervous system which occurs in some of the victims of hysteria.

I have had no personal experience with this agent. It is recommended in Hering's pathogenesis for several ailments. He mentions among the clinical cases:

° Intoxication, to entire loss of consciousness, from drinking whiskey.

I cannot recommend this to you as a good report. People "dead drunk" generally recover after a time, and it is doubtful if the medicine had anything to do with the recovery.

Hering recommends it in "asphyxia from alcohol or coal gas." It is evident he thinks the victim would recover sooner *with* than without this remedy.

The head symptoms are quite prominent, and it is reported to have cured the following kinds of *headache*: ° "Violent pain in the head, increasing until it causes confusion of mind, with feverish attacks, cold extremities, and spasmodic (?) pulse."

It is recommended for *facial neuralgia*, and "*toothache* brought on by warm food."

It causes quite severe intestinal irritation, and among the curative symptoms you will find ° "*chronic diarrhœa*, every four or six weeks, lasting one or two days, stools yellowish, frothy, sour-

smelling, fluid, with tenesmus and colic in umbilical region at night. It is said to cure °*constipation* with sour-smelling flatus."

Its administration to rabbits is said to cause "congestion of the upper lobes of the lungs, hepatization of the lower and posterior lobes, deposit of tubercles in the lungs, some ecchymosis, and infiltration." Hering therefore recommends it "in the first stages of tuberculosis of the lungs, before any or only slight fever has set in, flying, burning, and stitches in the chest, flushing of the face, dry cough, and difficult breathing when moving." Also for "constriction, stitching, pressing pains in the chest."

By referring to the provings you will see that it is recommended for *rheumatism* of the upper and lower extremities, for *sciatica,* very severe, of both the left and right thigh. The rheumatism seems to be attended with much "cracking of the joints."

It is further recommended for "itch, tetter, impetigo, herpes, and other cutaneous eruptions."

The dilutions may be made by adding to 10 grains of the drug 100 drops of alcohol. It should be kept in a glass or rubber-stoppered bottle. Do not try to make triturations.

BRACHYGLOTTIS REPENS.

(*Puke-Puke, New Zealand.*)

The cattle which eat the leaves of the *Brachyglottis repens* appear to get paralyzed in the lower extremities and fall on the hind quarter; after a few days they seem to sink; sometimes they recover, but regain their strength very slowly. The *natives* of New Zealand use it as a medicine to produce *perspiration.*

In its effects (see provings) it certainly produces symptoms of *albuminuria* and disturbances of the urinary organs. It has been a very reliable remedy in *Bright's disease,* and rarely failed to produce a satisfactory result.

PROVING.

(*September 7th to September 25th,* 1868.)

1*st day, Sept. 7th.*—C. F. F., 46 years old, with no illness, took, 10 A.M., 10 drops Tincture puke-puke in water. Pulse 60, pleasant taste. Immediately after taking it, soreness in the stomach. One hour afterwards, *pain in the right*

knee, a soreness and throbbing sensation, pain in the back and in the right side, *cold and chilly* for 1¼ hours; slight soreness in the throat and soreness on the nostrils exteriorly; pain in the arm—as if full, pressing pain in the forehead. 1 P.M. Heavy pain in the occiput and forehead; isolated sore throbbing in the right side, back, and left side; isolated sore throbs under the right armpit and in left groin; chilly; pulse 50. Pain in the thigh by walking.

2d day, Sept. 8th, 11 A.M.—20 drops. 12 noon. Weary pain in the upper arm, transitory pain in the left side of the head, weariness in the arms; faceache—left side, zygomatic process of the face, also lower jaw, *submaxillary glands;* pressure and soreness in *the neck of the bladder*, transitory pains in the thighs, similar to those felt yesterday; transitory throbs in the thighs; heat in the mouth; soreness in left wrist. 1 P.M. Severe pain around the loins, tingling itching in the cheeks and nose, with much sneezing repeatedly. Evening. Nausea, with eructations tasting of the food taken.

3d day, Sept. 9th, Morning.—Soreness in the groins, left groin especially; throbbing pain in the left elbow, weariness in the limbs.

4th day, Sept. 10th, 10 A.M.—40 drops. Eructations soon after taking it, fluttering in the stomach, soreness in the zygomatic process of the right side, shivering and chilliness immediately after taking the dose; frequent eructations of the taste of the medicine; excitement in the nostrils, more particularly left nostril, like yesterday, as if the air was too sharp. 10.30 A.M. Urine clear, but mucous streaks and filaments—(microscopic examination yielded numerous cells and epithelium); some time after voiding the urine the same soreness and pain in the neck of the bladder and anterior base of the penis as yesterday; sensation as if the urine could not be retained; rawness of the throat. 12 noon. Toothache in right side, extending to the ear; irritation as if the urine could not be retained, and slight soreness in the urethra; specific gravity of urine passed at 11 A.M., 1008; passed urine again 12.30 P.M., specific gravity 1004; urine acid, eructations. 1.30. Inclination to pass urine almost constant, soreness in the groin, weariness in the limbs, soreness in the kidneys, pressure in the chest, nausea, eructations, weariness in the arms, scraping sensation in the throat, painful throbs in left shoulder about the region of the collar-bone, soreness in the fingers and lower joint of the left thumb, weariness in the fingers by writing. 2.30 P.M. Passed a great quantity of colorless urine. 9 P.M. Evacuation of the bowels with severe constrictive and sore pain in the arms, weakness in the legs and groin by walking. All symptoms seem to last only three or four hours. A reaction seems to set in; passed no urine all the evening and night, then passed urine the next 24 hours 58 ounces, of specific gravity 1020, with mucous sediment.

5th day, Sept. 11th, 11 A.M.—80 drops. The effects on the urinary organs are decidedly exciting. Soon after taking the dose eructations, soreness under the shoulders, neck, and arms; prick in the ear, pain in the forehead, urine contains *albumen* and spermatozoa. 1 P.M. Weariness and weakness in the back, region of the coccyx, and dull pain in the kidneys; confusion in the head; all the morning excited in mind; a kind of cold tightness about the scalp, weakness in the limbs; toothache, heat in the mouth and soreness in the tongue, pain in the neck, and by rocking the head from one side to the other soreness in the attachment of the sterno-mastoid muscle to the neck; soreness in the right wrist, extending up-

ward; pressive pain in the left side of the forehead, soreness in the throat, weakness and soreness in the biceps and isolated thrills about the wrists; by walking weakness in the lower extremities, and pain like last night in the groin, left side particularly. No appetite; after dinner heat and itching in the nose. Passed urine of a dark-amber color, and containing several long threads, which by microscopic examination indicated *waxy casts;* acute stinging pains in the groins; the prostration in the extremities is more prominent, isolated throbs, pain in the forehead (it rained heavily all the day); driving during the afternoon felt slight headache; soreness and stinging on the tongue, pain in the back, and weariness in the extremities; a few stinging pains in the urethra. Soon after tea desire to urinate, rather a pressure in the neck of the bladder and stinging in the glans penis. The urine has been much less in quantity to-day than yesterday. 7 P.M. The urine specific gravity 1024, darker in color, and long threads floating in it. 9 P.M. Stool of papescent evacuation, attended with severe pain in the anus, pain also in the neck of the bladder; since the stool constant smarting and burning in the urethra and the glans penis. 10 P.M. Aching weariness in both arms, aching in the nape of the neck, muscles feel sore to touch, pressure under the sternum, the cervical muscles are sore by moving and bending the head, soreness in the left groin by walking, also in both calves; microscopic examination of the urine—threads, tubes, or casts, consisting of a regular mass of epithelic cells adhering to each other, which, on account of their length, come probably from the urethra and bladder; a feeling of rawness and soreness is clearly perceptible, and especially in the glans penis; passed urine again and feel great soreness in the urethra; the dull pain in the back and region of the kidneys is increasing, pain in the neck continues, soreness and rawness about the pharynx; the soreness extends from the neck to the shoulder and shoulderblade, attended with muscular prostration; passed 48 ounces of urine in 24 hours; examination yielded *triple phosphate*, oxalate of lime, and (cystine?); during the night slept heavily. Was awoke very early to go to a patient; pain and great weakness in the limbs.

6th day, Sept. 11th.—Took 80 drops. Half an hour afterwards headache; passed a large quantity of urine, not so painfully as yesterday, but after passing it desire to pass more and irritation in the neck of the bladder as if the bladder was not emptied; pain in the kidneys as yesterday; flushed face and headache around the forehead, pain in the back, continued all the afternoon, with soreness and weakness in the thighs and lower extremities, also prostration in the arm; was obliged to void urine three times, with pain in the urethra. 3 P.M. An inclination for an evacuation of the bowels, which, after long sitting and pressing, proved ineffective. Evening. Pain and soreness in the groins, both sides, as if in the spermatic cords, and a thrilling sensation, by sitting, through the penis and testes; an acute *throbbing* in the right hypochondriacal region; soreness under the shoulderblades.

7th day, Sept. 12th.—This morning, by walking, excessive prostration in the legs and soreness in the lower part of the spine; the weakness and the pain are more perceptible in the left thigh than in the right. The action of the drug influences evidently the sciatic nerve. The effect of the drug is decidedly on the spinal nerves; the pains are transitory, scarcely shooting, but short, sore *throb-*

binga, influencing the motor power more than the nerves of sensation. Except in the lumbar region of the spine, where the pain is more constant, aching and sore to pressure. The loss of appetite was great yesterday, but to-day a sinking sensation in the stomach. Although I felt a few times desire to evacuate the bowels, when attempting to do so no effect after long straining.

8th day, Sept. 13th.—Was well, comparatively; could walk a distance of six miles. The only perceptible effect of the medicine still remaining was the soreness in the urethra, and an excoriation internally at the corners of the mouth.

9th day, Sept. 14th.—Mixed 20 drops of the tincture in 20 spoonfuls of water. Took 4 spoonfuls at 12. Immediately after taking the medicine gnawing pain in the spine, region of the kidneys, the same isolated *throbs* or shootings in arms, dryness and rawness in the throat, severe pain in left jaw, submaxillary glands (of very short duration), tingling sensation in the ears. The soreness in the lower part of the spine, which had left me entirely, in the course of the sciatic nerve; throbbing in the left temple and headache, prostration and weakness in the right arm by writing, weakness in left arm, cracking of the joints of left arm, rigor, and chills. During the afternoon the symptoms subsided except weakness in the extremities. Urine, specific gravity 1023.

10th day, Sept. 15th.—The sleep during the night was good; no particular uneasiness during the day except constipation.

11th day, Sept. 16th.—A very restless and sleepless night, but whether attributable to the medicine is doubtful, having been much engaged during the day; the meals were irregular, and I could only take dinner late at night. However, after my ride this evening the severe pain in the lumbar region returned with great violence and is continuing. A great deal of pain in the upper arm, aching and severe pain in chest and back.

12th day, Sept. 17th.—Sleep during the night good and undisturbed. Took 4 spoonfuls of solution containing 4 drops. 10 A.M., after breakfast, pain and weariness in the back, headache; very sleepy and heavy; during the day constant yawning. Depressed in spirit and vexed mood.

13th day, Sept. 18th.—Since taking the medicine, from the commencement, tingling in the ear, and secretion in and from the ear increased, with which I have never been troubled. Very sleepy and heavy, yawning all day.

14th day, Sept. 19th.—Healthy sleep. Took, at 10 A.M., 1 spoonful of the solution. After breakfast immediate eructations. The sense of general lassitude predominates. Shooting, short, isolated *throbs* in the arms. Sensation of pain in the dorsum of right foot; confusion in the head; a degree of nausea. 11 A.M. One spoonful. Immediately sharp throbs in both knees at the internal and inferior attachment of the triceps; internal pain in the back returns, with great intensity in the lumbar region; the confusion in the head and pain in the forehead worse, the same throbs as in the knees are now in the sternum; with the pain in the sternum increasing nausea, pains flying about the chest and under the right shoulder; the headache concentrates itself more on left eye; stiffness of neck, as on former occasion, with pain. 12 noon. The weakness about the lower extremities is increasing in the same positions as before (in left leg more prominent), extending from the hip to the knee. In urinating flattening sensation in the bladder; pain in the neck as if I could not hold the head erect; weakness

and prostration in the arms, also right wrist; confusion of the head, great depression of spirits, soreness in the zygomatic process, left side; pain and soreness in the forehead, soreness in the neck anteriorly, sterne-mastoid process; pain in back continues, 8 P.M. During the afternoon, by walking, great weariness; when returning from my visits violent headache, pressing and *throbbing* about the forehead, beating, throbbing, and pressing; a painful twitch about the left side of the face; the evacuations of the bowels were small and knotty, and unsatisfactory ever since taking the medicine; the form of the fæces has been like balls—sometimes soft, as if diarrhœic, but always required a certain amount of effort to expel the fæces. This evening, with the evacuation, returned the soreness in the penis, as experienced by former provings, and a feeling as if the bladder had not been emptied. The headache lasted till midnight, with great intensity; felt very heavy, but no inclination to sleep; reading till 2 A.M., when retired to bed.

15*th day, Sept.* 20*th.*—Slept very heavy; coffee for breakfast; great lassitude and confusion this morning; stretching in the limbs, pain running in the kidneys and lower part of spine, transitory pains in the neck and left upper arm. At 12 noon, 20 drops in 8 spoonfuls of water, 1 spoonful of this solution; soon after taking the dose confusion, pain in the left side, lower maxillary; pricking in the ears; a sensation of pain gradually running down the left upper arm; the same sensation in right arm; the pain is remaining stationary in the left arm; a slight sensation of pain under the right axilla, extending to the sterno-mastoideus and great pectoral muscle. Sudden short pain right side (teeth), sudden but severe pain in the left temple; pain, as formerly, repeated in the left groin; muddled confusion in the head increasing, light rawness in the throat, severe aching in the lumbar region, nauseatic sensation in the stomach, cracking in the left shoulder. This has never been experienced before the proving. Greater inclination to stretch the limbs, and particularly the arms, as to give relief to an uneasiness between the shoulder-blades, evidently in the trapezius and clavicular muscles, also increased desire to stretch the head downward, as if the whole back would contract backwards; the desire for stretching the muscles and limbs is rapidly increasing in intensity; increased painful sensation in the neck. This muscular influence is proved by pain felt when the face is turned sideways; colic and inclination to stool; a slight nervous rigor all over the frame. All these symptoms occurred in succession during the first fifteen minutes. Hands feel cold and rigor is increasing, pain in left jaw, headache across the forehead, pain in right forearm and upper arm, soreness under the submaxillary glands. The evacuation of the bowels was small and ineffective, although the stools were neither hard nor knotty. 1.15 P.M. A sore *throbbing* in the glans penis. This is the same kind of pain as experienced all throughout the proving of the drug. Pain in the ears, both sides; chilliness, heat in the face and flushed; oppression in breathing, as if a deep inspiration would afford relief; pain in the dorsal muscles, particularly under the right thigh; shoulderblade; eructations and yawning. 2 P.M. Itching of the skin; itching and soreness of right buttock, near the course of the anus, which is tender and sore as if an eruption would appear; itching of right forearm; soreness now felt in both interior corners of the mouth, which has relieved itself externally by a swelling of the lips. These are the first symptoms of the skin since the commencement of the medicine. Painful itching; burning, by walking, under the

big toes; itching in the dorsum of the right foot; sensation as if the ears were stopped up, lasting for a short time; pain and soreness in the upper arm; severe sore pain in the left wrist; the same kind of pain also in the knees, not exteriorly. *All pains* are *throbbing* or sore throbs; cracking in the joints of the lower extremities when walking; great inclination to stretch. Was told by Mr. B. that the cattle and horses which eat the poison fall to the ground, as if the back was affected, and appear to suffer *across the loins*. Just now, while writing, feel a severe pain in the spine, first dorsal vertebra, which is painful and sore to the touch; pains in the calf from the knee downwards, exterior side of leg. 7.15 P.M. About one hour after tea same kind of sore throbs in the region of the stomach and liver, position of the duodenum. Took 1 spoonful, containing 5 drops. Rawness in the throat, right side, same as in the morning; pricking in the ears, frontal headache, nauseatic sensation in the stomach, pain of greater intensity than usual in the upper arm, near the insertion of the deltoid muscle. 8.30 P.M. Pricking and numbness of the tongue, pain in left ear, sensation as if the ears are discharging, slight twitches in the left side of the face; first time pain in chest, left side prominently, about the region of the heart; oppressed breathing, deep breath seems to give relief; great fatigue in the arms; more nausea; headache not so severe as last night; sudden pain in the spine about fourth to fifth dorsal vertebra, extending to right side of chest and shoulders. Passed 48 ounces of water on the 20th.

16*th day, Sept.* 21*st.*—The sleep was disturbed; awoke in the middle of the night twice and had difficulty to go to sleep again; dreams confused and wild; during the night itching and burning in the nostrils, with urinating burning in the urethra. Two spoonfuls. Immediately afterwards pain in left lower maxillary and face; throbbing in chest, region of the heart; pain under the right arm, rawness of the throat, giddiness, flushed face, itching and pricking in the ears; pain in the neck very prominent, affecting the upper or cervical part of the trapezius muscle and the splenius, lower jaw, right side; when moving tingling in right ear; again great prostration in the arms; forehead painful, and some pricking sensation in the skin of the forehead. During the afternoon when visiting my patients, great weakness; at one time, while sitting, a very severe pain in the bladder; pains of short duration in the region of the heart; soreness rather under the soles of the feet. All pains and sensations are *worse when at rest* (like *Rhus tox.*). Stiff soreness still in the neck. I am told by people that I do not look so well as prior to taking the drug. Certainly I am much thinner than I was a fortnight ago. By sitting the lumbar pain is more intense; soreness and stiffness in the neck; pain is flying about, now in the hands, fingers, then in the forearm and feet. At the commencement of the proving the symptoms appeared to have the character of nervous pains, while now they are decidedly muscular. Took one dose late, at 12, before going to bed.

17*th day, Sept.* 22*d.*—Sleep full of dreams, but was told that I talked in my sleep almost the whole night, which has never happened before, nor have I been subject to it. The urine passed during the 24 hours and saved amounts to 48 ounces; that which was secreted in twice voiding may be calculated at 8 ounces more; the urine is of specific gravity 1020, mucous sediment, white, flocky, more than any previous secretion. Bowels costive. Pains in the various parts were

felt all day; by walking great prostration; in the evening a settled, lasting rheumatic pain; moving, aching about the left knee, very soft diarrhœic stool this evening; pain in the arm.—C. F. FISCHER, M.D., Sydney, N. S. W.

THE BROMIDES.

The introduction of the Bromine salts into allopathic practice marked an era of improvement in the therapeutics of that school. It occurred just about the time that the influence of homœopathy, acting through public opinion, obliged the relinquishment of blood-letting. The Bromides took the place of the lancet, and were an incalculable improvement upon that instrument of destruction, for, notwithstanding the very general abuse of these salts, they rarely caused notable injury to the patient, and never, I believe, caused death. On the contrary, they have been of vast benefit in the treatment of disorders of the brain and nerve-centres. The amelioration of one disease, epilepsy, by their use, is enough to give them claim to a high place in the Materia Medica of any school.

Before taking up each salt I propose to make some general remarks relative to their mode of action, and explain how such action may be made to agree with our law of cure, and how our school may use them as homœopathic remedies.

I. The *primary* effect of the usual medicinal doses of any of the Bromides is to *contract all the bloodvessels*, notably those of the brain and spinal cord. Under their primary influence all the organs *sleep*, or are placed in that condition of quietude which leads to sleep. They arrest reflex action and diminish muscular irritability.

II. The *secondary* effect of the Bromides, which may occur during their prolonged use, or after their suspension, is just the opposite, namely: the contracted arteries dilate, congestion occurs, either passive or active; sleeplessness, nervous erethism, hyperæsthesia of the reflex nervous system, and abnormal muscular irritability results.

These pathogenetic effects are those which occur when the Bromides are administered to *healthy* animals or men.

Now in choosing a homœopathic remedy we cannot ignore, but

must take into account both actions of a drug. Herein we differ from the allopathic school, which, until very lately, made use of the primary effects of drugs only. The latter prescribes a drug to *cause* its primary action (the Bromides in fulness of the cerebral bloodvessels), and usually give unnecessarily large doses, which are apt to lead to secondary symptoms. In homœopathy we can prescribe the Bromides for cerebral and spinal anæmia, etc. (primary effects), using very minute doses, and thus aid in restoring the normal equilibrium of the circulation. In congestion, spasm, erethism, etc., we can prescribe the Bromides, for the latter belong to their secondary effects. According to the only rational *law of dose* we give appreciable doses, but not enough to lead to an aggravation of the malady.

The homœopathic physician, using the Bromides according to these rules, becomes possessed of a class of valuable remedies, without which his success in the treatment of many severe and dangerous disorders would be greatly diminished.

BROMIDE OF AMMONIUM.

This is the only one of the Bromides which has been subjected to a physiological proving by a member of our school. Dr. Cushing has published an excellent pathogenesis, made up chiefly from provings upon his own person.

Its action appears to be principally upon the *brain*, the *cervical and dorsal portion of the spinal cord, the eyes and nose.*

Its action upon the brain is similar to that of all the Bromides.

According to Brown-Séquard it is preferable to Bromide of ammonia "when there is a suspicion of the existence of congestion of the *base* of the brain or of the spinal cord and its meninges."

In accordance with this view of its special action I have usually selected this salt in the treatment of the first stages of *cerebro-spinal meningitis, basilar meningitis,* and certain severe *occipital headaches.*

It is well known that certain cerebro-spinal congestions are attended by a peculiar spasmodic cough. In such cases I consider this salt specifically indicated. It has not been as much used in

epilepsy as the potash salt, but in those cases where the predominant symptom is basilar congestion, I give it the precedence.

In the above affections the dose must be graduated to suit the age and idiosyncrasies of the patient. My experience leads me to the belief that the *maximum* dose is *one grain* for each year up to twenty years. For instance, a child of three years requires in severe cases three grains, repeated every two or three hours. A strong man of twenty or thirty requires twenty grains every three or six hours, until improvement sets in. In cases of less severity half or one-fourth the quantity may cure. Cases may occur where we may select this remedy from the symptoms of its *primary* action, namely, in conditions of *anæmia* of the base of the brain and upper portion of the cord, when such anæmia is due to a diminished calibre of its bloodvessels.

It is evident that it would not be indicated in cerebral anæmia due to feebleness of the heart's action, or a deficiency in the amount of blood. Such cases must be met by other remedies, as China, Ferrum, etc., aided by Digitalis and a bloodmaking diet.

Hammond ("Diseases of Nervous System") says: "It cannot be doubted that spasm of the bloodvessels, produced through the sympathetic and vasomotor nerves, explains the origin and continuance of many cases of cerebral anæmia. It is in this way that mental emotions act, and sometimes with such rapidity as to cause instant death. This spasm may be kept up for a considerable time, with the effect of developing the ordinary symptoms of cerebral anæmia even after the emotion which originated it has long disappeared."

It is in just such cases that the Bromides are primarily homœopathic. If the reader will consult the symptoms of these salts, he will find a perfect picture of brain anæmia. Especially do the mental symptoms point to that condition.

The *dose* in such cases must be very minute. I have seen prompt curative action from the 3^{x} and 6^{x} dilution, frequently repeated until improvement sets in.

The *eyes* are specially affected by the Bromide of ammonium. Dr. Cushing experienced "redness and soreness of both eyes, with sticking together of the lids in the morning; the eyes were full of stringy mucus, the eyeballs felt unnaturally large, and pain around

both eyes into the head; in the evening the eyelids droop, and it is painful and difficult to raise them."

Dr. Gibbs, an English surgeon, recommends it very highly in "strumous ophthalmia, conjunctivitis, corneitis, and leucoma." Dr. Woodyatt, of Chicago, an oculist (homœopathic), esteems it very highly in similar affections, and also in *swelling of the edges of the lids* and inflammation of the *Meibomian glands.*

I know of no more efficient remedy in that common affection, *catarrh of the posterior nares and fauces,* especially when the discharge is a *thick, stringy mucus.* A few grains of the 1ˣ trituration, three times a day, used persistently for a few weeks, will effectually remove that condition.

It was once lauded very highly by allopathic physicians in the treatment of *whooping-cough.* It was used successfully in many cases, but did not cure all, and as a consequence of its failure it has fallen into disuse. Too much was expected of it, but to the homœopathists it will prove a valuable aid in the treatment of that malady and many other *coughs* of a spasmodic character.

The characteristic indications are:

"Sudden, deep, spasmodic cough, causing a pain in the stomach.

"Cough, deep, spasmodic, severe, at intervals of a few moments, almost continuous for hours, especially when lying down at night, with sensations of tickling irritation in the larynx, sometimes with a distinct *whoop.*"

The expectoration, if any, consists of a stringy, tough mucus.

The provings of Cushing and Okie demonstrate that this Bromide is capable of causing a spasmodic cough resembling whooping cough. Another proof that all drugs capable of curing a disease are capable of causing a *similar* one. The curative dose I have found to lie between the 1ˣ and 3ˣ dilutions.

Dr. Griffiths considers that it acts upon the uterine bloodvessels as does Ergot, namely, causing contraction. He claims to have used it successfully in uterine hæmorrhage from any cause; also in amenorrhœa and dysmenorrhœa from congestion (?). I have had no experience with it in this direction, except in dysmenorrhœa; in a few cases, obstinate and obscure, it seemed to alleviate the suffering.

In the treatment of *epilepsy, convulsions,* and *sleeplessness,* this

salt is not as useful as some other Bromide. But it may be substituted if necessary. To ward off a threatened attack of epilepsy or convulsions from congestion of the brain 20 grains is as small a dose as will prove effectual in an adult. In children the dose has been stated. In the obstinate sleeplessness preceding an attack of cerebro-spinal meningitis the dose (20 grains) must be given at bedtime, and when the house and street are quiet.

BROMIDE OF CALCIUM.

"This salt is said, by Dr. Hammond, to have effects which resemble both Bromide of potassium and Chloral hydrate. It is asserted to be preferable to either when there is congestion of the brain *with* delirium and sleeplessness, or in sleeplessness alone with great nervous irritability."

This paragraph was written nearly two years ago. Since that time I have had frequent opportunities of testing its value, and do not hesitate to assert that it is the most valuable of all the Bromides in the treatment of *diseases of children.*

Hahnemann rightly considered the preparations of Calcarea almost indispensable in the treatment of diseases of children, especially during the period of dentition.

Calc. carb., Calc. phos., Calc. arseniosum, and Calc. iod. are a most valuable group, and if we add the Calc. brom. we have five medicines with which I am almost ready to assert we can treat successfully a large proportion of the ailments of children from birth to puberty.

Given in the lower triturations, or even 1 to 10 grains of the crude salt, we can control the cerebral congestions and irritations of children, whether direct or reflex.

The children for whom Calc. brom. is most useful are the lax-lymphatic, nervous, and irritable. They grow fast, but the flesh is not solid; they learn to walk with difficulty, the teeth come tardily, and are attended with gastric, intestinal, and cerebral irritation. It is useful in the vomiting and diarrhœa as well as for the sleeplessness, fretfulness, and tendency to brain disease.

My experience with this medicine has given me greater confidence in it in the incipient and first stages of cerebral diseases, in

such children as I have described, than in the much-vaunted Belladonna, Hyoscyamus, Aconite, and Bryonia. (Before I learned the value of Calc. brom. I had better success with Solanum and Æthusa than the remedies I have named.)

But to be successful with Calc. brom. it must be used boldly. No danger need be feared from its use. It is not a narcotic like Opium and its preparations. It simply contracts the cerebral vessels, preventing congestion, and at the same time it diminishes or prevents the dangers of reflex irritation.

One grain of the crude drug can be given for each year of the child's age, and this dose can be repeated every hour in urgent cases with perfect safety until the dangerous symptoms subside.

In milder cases of erethism or irritation the 1^{x} to 3^{x} trituration may be relied on.

I have often prescribed it for children fed by the bottle or otherwise, by dissolving two or three grains in their regular allowance of food for the day. I never saw any bad effects from it, but on the contrary the happiest results in the general improvement of the physical and mental condition.

I will here add that in thin, bilious, nervous children, with black hair and eyes, I have found the Bromides of soda or potassa to act the best.

I hope this earnest recommendation will have the effect of inducing physicians to pay more attention to the value of this truly beneficent remedy.

BROMIDE OF CAMPHOR.

This bromide would seem to be a combination of medicines possessing directly opposite effects. All the bromides, except the Bromide of quinine, cause primarily cerebral anæmia. Camphor causes cerebral congestion, and may cause epileptiform convulsions primarily. It would seem that a union of the two elements would counteract each other. My observations of the use of this drug in allopathic practice leads me to believe that the Camphor-effects predominate in most cases when it is given in large doses. I have known doses of from 6 to 10 grains cause congestion of the brain, with delirium and threatened convulsions. So commonly have

these unpleasant effects resulted from such doses that allopathic physicians are shy of prescribing it much of late.

Dr. Hammond, however, is quite successful with the drug, but he gives it in moderate doses. Its sphere of action is doubtless nearly that of Camphor, modified somewhat by the Bromine. It is primarily homœopathic to *cerebral congestion*, with great *nervous erethism*, especially when it assumes the form of *hysteria*. I should consider it secondarily indicated in cerebral anæmia, from previous overstimulation, and attended by sleeplessness, cold extremities, feeble circulation, and nervous headache.

Dr. Hammond published several cases in which he found it useful. I condense them as illustrative of its use in his hands.

Infantile convulsions due to irritation of teething, with the effect in each instance (two) of preventing the further occurrence of the paroxysms, which previous to its administration had been very frequent. *Dose:* in each case, one grain an hour, rubbed up in a little mucilage of Acacia. Three doses were sufficient in one, and two in the other case. The ages of the children were respectively 15 and 18 months.

A very obstinate case of hysteria, occurring in a young married lady, in the form of paroxysms of weeping and laughter alternately, with epileptiform and choreiform convulsions. *Dose:* four grains every hour. Improvement commenced after two doses were taken, but *ten* were necessary to entirely break up the attack. All previous seizures had lasted from five to eleven days, uninfluenced by medication or moral suasion.

Headache in women and young girls, due to mental excitement and excessive study. One dose of four grains was generally sufficient to cut short the attack.

Delirium tremens, in a large man of plethoric habits. Symptoms: great cerebral congestion, tremulousness, and great jactitation of the limbs; conversation muttering and incoherent; pulse full and soft; no sleep for several nights. 100 grains Bromide of sodium did not cause sleep; 5 grains Monobromide camphor caused sleep within half an hour. He slept over 12 hours; afterwards the same dose at night caused good sleep and relief of all the other symptoms.

In this case there may have been congestion of the brain in the

beginning, but it could not very well have been present after the patient had swallowed 100 grains of Bromide of soda. In fact, the symptoms which existed when the Camphor bromide was given were those of cerebral anæmia, a condition in which 5 grains of the drug would be likely to have a good effect. The Belgian physicians who first used it recommended it for delirium tremens. I think it will prove useful in the delirium of low typhoids, when anæmia of the brain and erethism are both present.

Owing to the powerful depressing influence which both constituents of this drug have over the generative organs of both sexes, I predict that it will form a useful remedy in the opposite conditions of *excitement* and *debility*. It must be primarily homœopathic to *impotence, torpor*, and *passive spermatorrhœa*, and I should expect it would cure such conditions when prescribed in the 3^x or 6^x triturations. It is secondarily indicated in *nymphomania, chordee, active spermatorrhœa, with nocturnal emissions and amorous dreams.* Dr. Hamilton says it is far superior to any remedy he has ever tried in chordee. I can testify to the same, and I have found that two or three grains at bedtime will effectually control nocturnal chordee, emissions, and erotic dreams.

In a case of obstinate *neuralgia of the testicles and prostate gland*, which were both indurated and enlarged, the patient having lost his sleep for weeks, two grains at night not only caused sleep, but greatly relieved the other symptoms.

In my third edition of "New Remedies" I predicted that it would prove useful in *cholera infantum* with impending or actual spasms. Its use in many cases since that time has justified that prediction. The 2^x trituration, a grain or two every half hour, acts very favorably in the collapse with cerebral symptoms. It may prove as useful in *cholera morbus* and *cholera Asiatica.*

BROMIDE OF ETHYL.

(*A New Anæsthetic.*)

Ethyl bromide, Bromide of ethyl, or Bromethane, C_2H_5Br, is a colorless liquid, of pleasant ethereal odor, biting taste, has a specific gravity of 1.470, boils at 41° C. (= 106° F.), and takes fire

only with difficulty. It is formed during the action of Bromine and Phosphorus upon alcohol, or by causing Olefiant gas to come into contact with Hydrobromic gas, or by heating alcohol with Amyl bromide. It is best prepared by pouring upon 1 part of white or red Phosphorus, in a retort, 40 parts of alcohol of 0.840, adding $\frac{7}{8}$ parts of bromine in rapid drops, distilling, washing the distillate with water, drying it with Calcium chloride, and rectifying it. It is but little soluble in water and is miscible with Ether and alcohol. When heated with water it splits into Ether, Ethene (Olefiant gas), Oil of wine, and Hydrobromic acid. With Potash it yields Ether and Potassium bromide, and with Aqueous ammonia it forms Hydrobromate of ethylamine.

When inhaled it produces, according to Rabuteau, a complete anæsthesia, as rapidly or more so even than Chloroform. This has been shown by experiments upon animals. Dogs are completely anæsthetized by inhaling it from a sponge for two to five minutes, and they rally from it quicker than after the administration of Chloroform. On injecting subcutaneously a solution of Muriate of narceia or morphia, before anæsthetizing with Ethyl bromide, similar appearances are noticed as when these substances are administered previous to Chloroform, namely, consciousness is partly retained, while insensibility to pain is complete.

Compared with Chloroform, Ethyl bromide cannot be called caustic, nor even irritating. It may be applied without danger, subcutaneously, upon mucous membranes, and even in the meatus of the ear. In this case it has an advantage over Chloroform and Ether, as the former is too irritating and the latter is too volatile. In doses of one to two grammes, administered to man, it does not interfere with the appetite, does not produce anæsthesia, but alleviates pain. In whatever way it may be ingested into the organism, it is entirely, or almost entirely, eliminated by the lungs. Only traces of it can be detected in the urine.

BROMIDE OF IRON.

This medicine has been recommended very highly by several physicians for *spermatorrhœa*, with anæmia, great debility, and depression of spirits. It has been used in the 2^x trituration. My experience is limited and not very satisfactory.

BROMIDE OF LITHIUM.

Dr. S. Weir Mitchell prefers this salt to the other Bromides, in that it does not cause eruptions, and that its action is far more speedy. He gives a case of a gentleman threatened with *apoplexy*, who had had one attack and was hemiplegic. He was taken with *numbness*, *vertigo*, *headache*, and *thickness of speech*; one dose of 30 grains removed the symptoms in less than half an hour. He also records a case of *epilepsy*, when a fit occurred every morning, on rising. Cured by 10 grains twice a day. When the other Bromides lose their effect in epilepsy this salt will arrest the fits.

It relieved a case presenting the following symptoms: after any prolonged mental exertion, flushed face, insomnia, and intense pain between the shoulders.

If I was to prescribe any Bromide in rheumatism and gout, I should prefer this on account of the Lithia which it contains.

BROMIDE OF MERCURY.

I have used this preparation in a few cases of *diphtheria*, with great painfulness of the inner throat, white deposit, and a dusky redness of the fauces and tonsils. It acts very satisfactory in the 3x trituration. Dr. Hildreth (an oculist) was enthusiastic in its praises in *iritis* and intense congestion of the tissues of the eye.

BROMIDE OF NICKEL.

The only mention of the preparations of Nickel in our Materia Medica is the pathogenesis of Niccolum carb. in the "Symptomen Codex," but I am not aware that it has ever been used much by our school, no clinical record having come under my notice.

By referring to the head symptoms, however, it will be seen that it causes a peculiar headache—a *bruised aching*, as if the head were being dashed in pieces, with *heaviness*, vertigo when rising, also tearing, stitches, hammering, boring, etc.

These headaches resemble those of Nux, Ferrum, China, and Arsenicum.

The Sulphate of nickel, which I mention in the "Therapeutics

of New Remedies," was introduced into use by Dr. J. Y. Simpson, of Edinburgh. He prescribed it successfully in *periodical headaches*, and more lately some American physicians have found it successful in *neuralgic headaches*. I have cured periodical headaches resembling the cephalalgia described in the provings of the Carbonate of nickel. It occurred to me that the Bromide of nickel, on account of its greater solubility, and the addition of the bromic influence, would be a better preparation than the Carbonate or Sulphate. I presented this to the profession through the Wisconsin State Society for trial in headaches. Until we have separate provings of this salt the symptomatology of the Carbonate can be used whereby to select it. I would advise the 2^x or 4^x trituration or attenuation.

BROMIDE OF POTASSIUM.

This was the first preparation of the Bromides which was presented to the profession. It has been most extensively used and its effects recorded with greater minuteness than any other. Of late, however, the Bromide of sodium, owing to its less irritating effects on mucous surfaces, its pleasanter taste, and some other qualities, is considered preferable. In fact, I think for the most purposes the Sodium salt may be used as a substitute for the Potassium.

The pathogenetic and physiological action of the latter has been so well studied that we may safely allow it a place among our best proven medicines. Already it has been prescribed successfully for its direct primary effects by several physicians of our practice.

No physician can read of its effect upon the mind without being convinced of its great power in causing abnormal conditions of the *brain* and *mind*.

It is supposed that the uniform pathological condition caused by its direct effects in large doses is *cerebral anæmia*. If this condition is kept up, we have *deficient nutrition*. If the brain has been already diseased, structural or functional disease may become permanent—fixed by its primary or secondary action.

The most prominent, unvarying symptoms of the *brain* and *mind* caused by this drug are:

(1.) *Profound melancholic delusions*, either a religious depression or a feeling of moral deficiency.

(2.) *Loss of memory*, absent-mindedness, he forgets how to talk, slowness of ideas.

(3.) *Delusions* of conspiracies against him.

(4.) *Illusions*, as that of seeing her brother fall overboard.

(5.) *Amnesic aphasia;* he could pronounce any word he was told to, but could not speak otherwise.

It does not cause melancholy with belief in approaching poverty and want, but the contrary; a belief that "thousands of dollars are sewed up in his clothing," or that "gold was concealed in the lining of his coat."

These profound melancholic and other illusions were all caused by massive doses. If, therefore, this medicine is prescribed for the symptoms enumerated as primarily pathogenetic—*e. g.*, mental depression from cerebral anæmia or exhaustion—it must be given in minute doses, 3ˣ to 6ˣ.

Dr. Wesselhœft, of Boston, and myself have prescribed it successfully in such cases after Cimicifuga, Sulphur, and Veratrum failed.

The *secondary* pathogenetic effects of large doses are sometimes quite serious. It has been observed that when doses of 40 to 60 grains, several times a day, have been suddenly suspended, one of two conditions sets in: (1) a condition of *cerebral irritation*, (2) *cerebral congestion*. In cases of post-mortem of animals to which the Bromide had been given in massive doses, *intense congestion* of the brain and its meninges were found. This proves that the secondary action of the Bromides is to cause that condition for which it is given successfully. It is, therefore, homœopathic in rational doses (1 to 20 grains) in cases of cerebral irritation and congestion.

I have collected numerous cures of such cases and recorded them in "New Remedies," 4th edition, but will here briefly enumerate them, and will add that I have verified nearly all of them in my own practice.

The first or irritative stage of delirium tremens is ordinarily

treated by 5 to 10 grains of Bromide repeated every two or three hours; but the face must be flushed, eyes red, pulse quick and hard, with delirium of active type and horrid illusions. If the face is cold and pale, pulse weak and thready, Digitalis is the proper remedy. I have found these two medicines, aided by Cimicifuga 3^x, or Hyoscyamus 1^x, to control all cases of that fearful malady.

No remedy compares in efficacy with this in the treatment of *night terrors of children*, from any cause. A few grains, according to the age of the child, given at bedtime, banishes these attacks at once, and often for a long time. If *worms* are present, a few doses of Santonin 1^x, during the day, is a valuable adjunct.

Frightful imaginings in pregnant women, usually caused by an engorged condition of the brain, are speedily dissipated by a few doses.

Somnambulism has been cured by it.

Puerperal mania, when attended by ferocious or erotic delirium, is always relieved and often cured by the free administration of this medicine.

Spasms and convulsions from fright, anger, and other emotional causes, occurring in plethoric, nervous people, or in women at the time of the menses. I prefer it to any other medicine.

Epilepsy, when the attacks are attended or caused by unmistakable congestion of the brain, are always alleviated. It has been asserted by our school that it never cures. I *know* that it has cured many cases of epilepsy of a recent character, and not dependent on constitutional causes. I admit that it will not cure congenital epilepsy, or the syphilitic, but it will modify such cases greatly; and it is only common humanity to give it for that purpose, even when a *cure* is not expected.

I must mention one other condition of the brain and mind in which I have often found it useful, namely, in that condition of nervous irritability caused by the severe illness or death of some dear friend, or loss of property, or reputation. The patient is constantly fretting, will not eat, cannot sleep, is very irritable to all around; the pulse is quick, tongue coated, and breath fetid. In these cases give every hour or two a teaspoonful of a solution of

20 or 30 grains in half a glass of water. You will be gratified with the result.

In *acute congestions* or *inflammatory diseases of the brain* I confess to a great liking for this medicine. It ranks with Aconite, Gelseminum, Veratrum viride, and Solanum. (I regret to say that I have nearly always been disappointed in Belladonna and Glonoin.)

In *active congestion* or *the first stage of inflammation*, before effusion has occurred, I verily believe the Bromides, if promptly and properly given, will arrest the disease. I did not at one time believe this, but repeated failures with our best remedies prompted me to give this a fair trial. I had hundreds of times been mortified and angry at the failure of Aconite, Belladonna, Bryonia, Gelseminum, Glonoin, and Veratrum, aided by hot foot-baths and cold water to the head. The patients would grow worse, and either run into fatal cerebral disease or into the hands of allopaths. I once resolved that the next case that occurred I would treat boldly with some Bromide. Two severe cases soon came under my care—a child aged 3, and an adult woman of 30. To the former I gave 3 grains, and to the latter 15 grains, every hour for four hours, when I had the satisfaction of seeing a *decided* improvement, followed by a recovery under smaller doses and less often repeated.

Since that time, unless I see very prominent characteristic indications for some other medicines, I give the Bromide (of sodium) generally, and have been perfectly satisfied with the results.

In the *reflex cerebral irritations and congestions* of children during teething, cholera infantum, or in scarlet fever, it is almost specific. Also in *incipient basilar meningitis*, many cases of which I have arrested before serious disease fixed itself on the child.

The *eye* and *ear* symptoms are important as designating *local* disorder. The *amaurosis*, strabismus, squinting, photophobia, etc., the ringing in the ears, and sensitiveness to noise, all point to cerebral irritation.

It causes, and will cure, a peculiar state of the *throat*, in which the patient is choked every time he tries to drink *fluids*, although he can swallow *solids* with impunity.

I have often verified Dr. Caro's recommendation and practice

in treating *difficult and painful dentition* of children by its local application. Dissolve a few grains in an ounce of milk or water, and bathe the gums. From being turgid, swollen, and red, they assume their natural color. If the salivation is difficult, it restores it; and the sleeplessness, jactitation, vomiting, and diarrhœa are all relieved.

In the *vomiting of drunkards* and of *pregnant women* it often acts magically. It quiets that reflex action, whether arising from the brain or uterus. Give a dose, say 10 grains, at night, and the same amount in the morning before rising. A few days' trial will suffice to test its value. One of the worst cases I ever saw was cured by enemas of 20 grains, night and morning.

Hysterical women often vomit their food after each meal, especially if they are subject to exciting emotions. A few grains given just before eating will often prevent the recurrence of the vomiting.

Several years ago one Dr. Caro, of New York, made a report on cholera infantum, in which he claimed to have cured one hundred and fifty-seven out of one hundred and sixty cases by the administration of Bromide of potassium, in doses varying from one-fiftieth to two grains every hour.

This report created quite a sensation, and allopathic physicians all over the United States tested its value in that disease. Many homœopaths, attracted by the "glittering generalities" of Caro, gave it a trial, but the results failed to verify Caro's experience, and the medicine fell into disuse.

Such is too often the case with new remedies in allopathic hands. How shall we explain this discrepancy? Bromide of potassium does not cause this disease by its primary action, and its secondary action has not been sufficiently studied to show that cholera infantum belongs to the secondary effects. I believe, however, that it *would* appear if children were the subjects experimented upon.

What is cholera infantum? A disease of the bowels? I believe that true cholera infantum, that kind which comes on suddenly, attended by *great prostration, cold hands and feet, hot head, dilated pupils, rolling of the eyes and head, starts, jactitation, spasms, watery, very offensive stools, vomiting of all drinks, and intense thirst,*

is nearly always a disease of *cerebral origin*, or an overexcitement of the nervous and vascular systems. Probably Caro's cases were all of that character, or nearly all. Certain it is, that when I meet with cases such as above described, I find one of the Bromides to be almost specific in removing those symptoms. I do not rely on it in all cases alone, but alternate Camphor, Veratrum alb., Carbolic acid, or Solanum, as the case seems to indicate. But in the majority of cases I rely on the Bromide alone.

Asiatic cholera has been successfully treated by twenty-grain doses of Bromide every hour. Dr. Begbie says: "In the first stage it arrests the vomiting, the cramps and the rice-water discharges, restores the secretion of urine; the warmth and color returns to the previously cold and livid skin." He suspends its use when reaction sets in. I have never had oppurtunity to treat cholera with this remeday, but from my happy experience in certain cases of cholera infantum I should prescribe it with every hope of success.

Colic in young children of a peculiar character, according to Sidney Ringer, is readily cured by it. I have often verified his recommendation. The special symptoms are: "The walls of the belly are retracted and hard, while the intestines can be seen at one spot contracted into a hard lump, of the size of a small orange, and the lump can be seen to travel from one part of the belly to the other. These attacks are frequent and excruciating, are unconnected with diarrhœa or constipation, but are often associated with an aphthous condition of the mouth." I have often observed that the attacks were periodic, coming on in the evening at a regular hour. I give a grain or two of the 1ˣ trituration in water every two hours during the interval, and every fifteen minutes during the attack.

Constipation of years' standing has often been cured unexpectedly while giving this remedy continuously for other disorders. I cannot pretend to give a *rationale* of its curative action in such cases; but the fact is worth noting.

Some anomalous disorders of the rectum have been benefited by the Bromides. Dr. Helmuth cured "polypoid tumors." I have relieved spasms of the sphincter ani.

Dr. Caro records a cure of a child three days' old who had re-

tention of the meconium. The infant vomited all food; no action of the bowels. One half grain of the 1ˣ trituration every hour rapidly removed these conditions.

If this medicine was useful in no other sphere, its prompt and beneficent action in

Morbid affections of the organs of generation would give it a high rank as a curative agent. In massive doses it causes a diminution, sometimes absolute, of all sexual desire and power. In this respect it resembles Gelseminum, Conium, Camphor, Baryta, and Caladium; but, unlike these drugs, it does not cause this impotent condition in all cases. It does, however, often give rise to secondary effects just the opposite. Pelvet says it causes contraction of the minute afferent vessels of the corpus cavernosum (primarily). The reaction against this contraction is, therefore, congestion or fulness, thence erections, etc. It is (primarily) homœopathic to *impotence*, with loss of desire or power, or both, with or without atonic spermatorrhœa, and in such cases should be used in the 3d or 6th attenuation. It is (secondarily) indicated in *satyriasis, nymphomania, erotomonia* (hysterical, with spasms), sensual, amorous, and disgustingly lascivious dreams, nocturnal emissions, *with erections and dreams, chordee*, etc.

I have made frequent and very successful use of it in all these latter conditions, giving 5 to 20 grains once, twice, or thrice a day, and have never seen other than good effects from its use.

In some of the *menstrual ailments* it is specific, namely, when they are preceded or attended by epileptic spasms, catalepsy, headache, and congestive heat, burning and irritation of the genitals, nymphomania, erotic fancies, lascivious dreams, sleeplessness, spasms of the uterus, pains in the ovaries, menorrhagia, and many disagreeable reflex symptoms.

I have records of many cases cured promptly by giving a few grains daily through the mouth, and every hour or two during the menses.

Ovarian disorders, such as irritation, neuralgia, swelling, and even tumors, have been cured by the Bromide. It has a specific influence on those glands, and ought to be used more in the reflex disorders caused by ovarian diseases.

Enlargement of the uterus, especially that kind called by Simp-

son "subinvolution," or a failure to return to its normal size after labor or miscarriage, speedily resolves under the use of this medicine. It has even relieved the pain and diminished the size of *fibrous tumors of the uterus*. This, with the Iodide of baryta and Ergotin, will, I believe, prove to be the best treatment for all tumors.

Among the few pathogenetic symptoms recorded by homœopathic provers, we find "profuse urination, *with thirst*, copious, yellowish-white, thin urine, having a peculiar fetid smell; the urine *sometimes* contains albumen." These symptoms would appear to indicate it in diabetes, and *Begbie* reports two cases of *diabetes mellitus* which he cured in six weeks by giving 20 grains three times a day. The symptoms were pronounced and unmistakable. The inquiry may arise, Why did such large doses cure? When it is remembered that if a man with the ague takes 20 grains daily of Quinine, the urine will contain the 20 grains, yet the man is cured of his ague (see Grauvogl), we can say the same of the Bromides. It is all, apparently, eliminated by the urine, yet the patient is cured. Maybe one grain or less would have cured the two cases, but if the 20 grains cured without injury, where is the harm?

Nocturnal enuresis has been cured by the Bromides. I cured several children of this troublesome disorder when giving them this medicine for "night terrors," which sometimes has some connection with the bladder difficulty.

In *whooping-cough* it often acts as well as the Bromide of ammonium.

Spasmodic croup is often relieved promptly, especially when it occurs suddenly in the night, and is the result of reflex irritation from teething or worms, rather than a catarrhal irritation.

Dr. Snelling once treated many cases of *diphtheritic angina and membranous croup* successfully with this Bromide; but for some reason his use of it was not adopted extensively.

(The Bromide of mercury will probably prove a better remedy.)

Dr. Carson relates an obstinate case of *nervous cough during pregnancy*, threatening abortion. The cough was dry, hard, and incessant. No disease of lungs or throat. Opium and Belladonna were tried for two months uselessly. A few doses of the Bromide

of potassium cured. I have cured several similar cases, even when occurring in children; a peculiar barking, brassy, incessant cough, which Kali bich. ought to have cured, but did not.

It ought to cure in high potencies, loss of sensation in the glottis and larynx, but I have had no experience with it in such cases.

Spasmodic asthma in children (asthma of Millar), according to Hebra and Londahl, has been cured promptly by this Bromide, even when suppression of urine, œdema, lividity of the body, and great dyspnœa had set in.

Cardiac neuroses are often among the most obstinate and difficult of all the maladies the physician is called upon to treat. Medicines which have a *special* affinity for the heart, such as Digitalis and Cactus, exercise but little influence in these affections, unless the disorder has its origin in the ganglia of the heart itself.

The majority of cardiac neuroses have their origin remote from that organ, namely, in some irritation or atony of the brain, spinal cord, liver, or reproductive organs. They are kept up by reflex irritation, or nerve enervation.

The Bromides, if judiciously prescribed, will act curatively in that class due to *irritation* of a reflex character, especially when that irritation is in the uterus, ovaries, brain, or spinal cord. If the disorder is due to nerve enervation, the most useful remedies are Phosphorus, Zinc, Ferrum, Ignatia, Nux vomica, Lilium, etc.

I can give no characteristic symptoms. The best guide for its use is in the general indications above given. All kinds of *excited action, irregularity, palpitation*, etc., when unattended by local lesion, come under the sphere of its usefulness.

In *sleeplessness*, no medicine has been more abused. It is not useful in all cases. In fact there is but one pathological state in which it is useful, namely, an *overfulness of the cerebral blood-vessels.* When we have this condition, the Bromide, in doses of 10 to 20 grains, restores the normal calibre of the bloodvessels, and sleep *comes of itself, i. e.*, it is not *forced.* The remedy acts in a physiological (homœopathic) manner.

Sleeplessness from this cause may arise from various causes, namely, mental anxiety, excessive intellectual labor, hysteria, pregnancy, teething, the exanthemata, typhoid fever, erysipelas,

and a general "nervous irritability;" also anger and various exciting emotions.

Sleeplessness may arise from an *anœmic* state of the brain, and then demands Opium, Hyoscyamus, Ignatia, or Digitalis, aided by food and a low position of the head.

The action of Bromide of potassa on the *skin* is quite decided and specific. It seems to cause, invariably, after it has been taken some time in large doses, (*a*) an eruption of *small boils*, in successive crops, chiefly over the face and trunk, with troublesome itching; (*b*) a papular rash on the face, with heat and itching; (*c*) acne, chiefly on face, scalp, and shoulders, not very painful, varying in size from a millet-seed to a large pea; (*d*) pustular eruptions of malignant aspect, much resembling varioloid; (*e*) corroding ulcers. Nursing children have had the characteristic acne, from the taking of a Bromide by the mother, showing that it is taken up into the milk.

It ought, therefore, to be homœopathic to these cutaneous affections. My clinical use of the Bromides in skin diseases has been confined to the treatment of acne in young people of gross habits of eating, in which disorder it has seemed to act beneficially in the 3d trituration.

I have used it successfully in the following general nervous affections: *paralysis agitans, tetanus, chorea.* In that condition known as hysterical spinal irritation, and in anomalous disorders of the vasomotor nerves, it is worthy a thorough trial.

BROMIDE OF QUININE.

Dr. Richardson, of England, introduced this medicine, and used it with favorable results. I have had no experience with it, but should I have much *ague* to treat, I think I should give it a fair trial. It ought to prove very useful, and in some respects superior to the Sulphate. The unpleasant congestion of the head might be avoided, as the two constituents are antagonistic.

BROMIDE OF SODIUM.

I have already mentioned this salt. It is to be preferred in nearly all cases to the Bromide of potassium. It can be mixed

with the *food* of patients, with the milk of children, as its taste is almost identical with common salt.

BROMIDE OF ZINC.

This combination has been but little used except by its originator, Dr. Hammond, of New York, and by Dr. Delamater, of Chicago, who estimate it very highly in certain cerebral affections.

As homœopathists we value Zincum as a great remedy in diseases of the brain and nervous system. We know that Zinc, by its ultimate primary action, causes and cures cerebral depression, anæmia, and even paralysis. It is our sheet-anchor in cases of senile atrophy, softening, and brain fag. It has saved thousands of children from the fatal effects of hydrocephalus and hydrocephaloid conditions. In my opinion the Bromide will prove more useful than Zinc alone, for it has a quicker action and is absorbed more readily.

It is but a few months since I procured this drug, but I have already learned to value it highly. I prescribe it for the known effects of both Bromine and Zinc.

Teething children often suffer intensely from pain in the nerves of the head and face. These pains often throw the children into an exhausted condition, marked by stupor alternating with wakefulness, until they are so worn out that symptoms simulating hydrocephalus appear. In such cases the 3d or 6th attenuations act promptly.

In the brain fag of business men I prefer the Phosphide of zinc. But if this condition is attended by *violent pain* in the head—periodical—the Bromide is superior.

In chronic congestion of the brain, attended by a tendency to dementia or melancholy, the Bromide is also useful. In some respects it is an analogue of Picric acid or Cimicifuga.

BUFO.

I have seen no reason to change the opinion I expressed in the third edition of "New Remedies," relative to the trustworthiness of the provings of this and other medicines of which Houat has

given pathogeneses. It would be better for our school had they never seen the light.

I have tried the Bufo in several cases of *epilepsy* when it seemed indicated, but I never saw any such brilliant results as have been recorded by Dr. Holcombe and others.

CACTUS GRANDIFLORUS.

I doubt if this medicine has come up to the expectations of some members of our school of practice. It was heralded by the most fulsome laudations of its great value, not only in diseases of the heart, but in all other acute inflammations. I do not remember, however, to have seen any record of diseases other than *disorders of the heart* cured by the Cactus.

It is my opinion, from careful observation and study of its action, that *all the symptoms and conditions caused and cured by Cactus are due to its affinity for the heart, and its pathogenetic action thereon.*

It appears to me that its action on the heart is that of an intense irritant of the ganglia of that organ. It may thereby cause the several conditions of *hyperœsthesia, irritability, neuralgia, spasm, irregular action,* and, finally, *inflammation.* It differs from Digitalis in this, that it seems to have an action on the *circular fibres* of the muscular tissue of the heart, while Digitalis acts on *all* the muscular fibres alike. Cactus is capable of causing *carditis* and *pericarditis;* Digitalis is not. Cactus resembles Bryonia, Aconite, and Spigelia more than it does Digitalis. In only one condition does it resemble Digitalis, namely, *cardiac failure,* and in both the failure is a *secondary effect.*

If you will carefully study the symptomatology of Cactus, you will see that the mental, cerebral, ocular, aural, nasal, pharyngeal, gastric, hepatic, urinary, ovarian, uterine, and thoracic symptoms can all be traced back to a profound cardiac disturbance.

It will be useless, therefore, for you to prescribe Cactus in disorders of the above-mentioned organs, unless the great central organ of circulation is at fault.

I wish to call your attention particularly to the *hæmoptysis* of Cactus. It is not indicated in spitting of blood, unless it is caused

by an excited action of the heart, acting on pulmonary vessels weakened by disease of the lung-tissue.

In *hæmoptysis*, with weak, small pulse, it is not indicated; but if the heart's action is hard, tumultuous, and the pulse similar, then Cactus will arrest it. The blood must be bright and fluid (arterial).

It is recommended in *pneumonia* and *pleuritis*, but has not attained any popularity in those diseases. In the few cases reported the pulse was hard, vibrating, 120. I suspect, in all cases when it is useful, some cardiac inflammation or abnormal excitement must be present, as a complication, or as a cause.

The *bronchitis* and *asthma* in which it is indicated is, without doubt, always a cardiac complication.

The characteristic symptom of Cactus heart-trouble is "*a sensation as if the heart was constricted as by an iron band.*" This sensation is very distressing, and whenever felt is a pretty sure indication for this remedy, or for Iberis, Arnica, and sometimes Digitalis, but in a less degree.

Valvular diseases of the heart may be palliated by Cactus in a large proportion of cases, unless the disorganization is too far advanced, when Digitalis will be of greater service.

Hypertrophy with enlargement is more under the control of Cactus than is hypertrophy with *dilatation*, which is just the reverse of Digitalis, Iberis, or Lycopus.

For the numerous cases cured or relieved by Cactus, see the extended collection made in the fourth edition of "Symptomatology of New Remedies," which I copy.

* Sensation of constriction in the heart, as if an iron band prevented its normal movement.

* Palpitation of the heart, continues day and night, worse when walking, and at night when lying on left side.

° Functional disorder of the heart from mental emotion, aggravated at the menstrual period.

° Angina pectoris.

° Palpitation, acute and chronic, even in organic diseases of the heart.

° Acute inflammatory affections of the heart, idiopathic, and even from rheumatism.

° Acute carditis, with blueness of the face; oppression of breathing; dry cough; pricking pain in the head; cannot lie on the left side; *pulse* quick, throbbing, tense, and hard.

° Chronic carditis, with œdematous and cyanotic face, suffocating respiration, continued dull pain in the heart, dropsical effusion throughout the body; cannot drink or speak; hands and feet cold, pulse intermittent.

° Hypertrophy with dilatation; patient is pulseless, extremely exhausted, panting, and sad; cannot lie down or speak; has scarcely slept for fifteen days; forgetful; feet œdematous. (Is soon relieved, lies down, and sleeps twelve hours.)

° Organic diseases of the heart; valvular diseases (an invaluable palliative for many distressing symptoms).

° Heart disease, with œdema of *left* hand only (no other remedy has this symptom).

° A constant *fluttering* sensation in the stomach over the location of the cœliac axis, in a spot about the size of a dollar; a burning line extends down from it to the lower ribs on either side; a hot flash shoots downwards frequently (cured by a few doses).

° Rheumatic inflammation of the heart with severe pain in the apex of the heart, and pain shooting down the left arm to the ends of the fingers; dyspnœa, pulse feeble, 120, etc.

° Palpitation of the heart from any exertion, with excessive pain over the left side between the scapulæ and sacral region.

° A whizzing to-and-fro sound, or *bruit de soufflet.*

° Endocardial bruit, increased præcordial dulness, excessive impulse of the heart's action, and evident enlargement of the right ventricle.

° Great iregularity of the heart's action—intermittent at times and of varying character—great frequency of action alternating with slowness. (Enlargement of left ventricle, with great irritation of the cardiac nerves.—Sandford.)

° Irregularity of the heart's action, from reflex irritation.

° Palpitation, with vertigo, dyspnœa, loss of consciousness.

Indications for Cactus in cerebro-spinal meningitis:

Melancholic and hypochondriac mood.

Vertigo from congestion to the head.

Heavy pains, like a weight on the vertex, worse from sounds, even talking.

Pulsative pains in the temples, intolerable at night. Dimness of sight, circles of red light before the eyes.

Pulsations and buzzing in the ears.

Contraction in the throat and œsophagus, preventing swallowing.

Oppression on the chest, like a great weight, or as if the chest were compressed, with fainting, cold perspiration, and loss of pulse.

Sensation of constriction around the heart, as if an iron band was around it.

Very acute pain, and such fearful stitches in the heart as to cause him to cry aloud, with distressing palpitation, faintness, dyspnœa, etc.

(Pains everywhere—head, arms, legs, back, chest, heart; darting, springing like chain-lightning, terminating with a sharp, vise-like grip, only to commence again a moment afterward, with restlessness and groaning.)

This last symptom is a curative one, observed by Dr. Lilienthal, and doubtless would be found pathogenetic in a full proving.

This sense of *constriction* seems to affect all portions of the body. Dr. Farrington writes me that "a very intelligent lady, who for years has used homœopathy, took many doses of Cactus[30]. She complained of irresistible inclinations to cry. She felt as if her *whole body was in a wire cage*, and that each several wire was being twisted tighter and tighter."

Dr. F. also sends me a case of *rheumatism of the diaphragm*, cured by Cactus 30th and 200th. The symptoms were "constriction around the lower part of the chest as from a cord, the constriction marking the periphery of the diaphragm; jerking breathing; sharp pains shooting through the body, towards the back and upwards into the chest, with sensation of rush of blood to the chest." The C. Bonplanti and another species have lately been used successfully in place of C. grand.

CALABAR BEAN.

This powerful and unique medicine has not been sufficiently proven by our school to enable us to arrive at any definite conclu-

sion as to its special symptomatic indications. There are certain pathological conditions which it has been known to cause, and these afford us trustworthy data for its use in some peculiar cases.

According to the best observers of its effects in large and poisonous doses, its operation is *spinal*, not cerebral; it acts on the anterior or motor column, so as to suspend or deaden its energy, or reduce the activity of its functions. The powerless parts are those which receive their nervous supply from the spinal cord and its nerves. The muscles of the extremities and of respiration are most enfeebled; the paralysis is *primary* and always seated in the *striped* muscles; there is no failure of volition; the will is strong, but a difficulty lies in the way of carrying out its purpose. The paralysis is commonly preceded by twitching or trembling of the muscles (in animals convulsions).

In rare cases the unstriped muscles and brain are involved (secondarily).

Death occurs from paralysis of the heart, or fatal syncope. (Digitalis from the opposite, or tetanic contraction.)

To sum up its effects, as I conceive them: (1) General paralysis of motor nerves, or voluntary muscles (primary); (2) paralysis of involuntary muscles (secondarily).

Viewing its action in this light, you will see that it is primarily homœopathic to such maladies as:

Chorea, of which there are several cases reported as cured by ten to eighteen drops a day. (*a*) A boy of fourteen, the disease had lasted several months; had resisted Ferrum, Arsenicum, and Zinc; cured in nine weeks. (*b*) A girl of twenty; cured rapidly. (*c*) Chorea of right side, the tongue seemed too large (paralyzed). The symptoms are not fully recorded, as they should have been.

Paralysis agitans, if no structural lesion, as softening of nervous tissue, exists. Several observers (allopathic) mention that it did no service in such cases. Hammond ("Diseases of Nervous System") says: "Under the term paralysis agitans several affections have been included, which are very different in character." He classes them: (1) multiple cerebral sclerosis; (2) cerebro-spinal sclerosis. "These two are usually met with in old persons and depend on organic wasting changes in the nervous centres, are incurable, and known as 'shaking palsy.'" (3) A form of tremors occur-

ring in younger persons, is more curable, and therefore is presumably not dependent on organic change. The causes of this variety are emotional disturbance, continuous or severe muscular exertion, exhausting diseases, rheumatism, blows, falls, etc.

The Calabar bean in small doses (lower dilutions, possibly the high) will doubtless prove curative in this form of tremors. It may have to be preceded or followed by Arnica, Ignatia, Scutellaria, Cocculus, and Phosphorus. The "constant primary electrical current," according to Hammond, is very useful in all cases.

The *heart* may partake of this variety of tremors. I have met with several cases due to emotional disturbance. In one case I used Calabar 3x with good results. It is certainly homœopathic to cardiac debility, and ought to be useful in that peculiar condition I have named *cardiac chorea.*

I recently cured with Calabar a case of *tetanic spasms*, where the *heart* was affected by the disease. (See "N. A. Jour. Hom.," May, 1875.)

Cerebro-spinal meningitis. It was first used in that terrible disease by some eminent allopathic physicians of Chicago. Their successful use of it coming to my knowledge, I ascertained that they used it, as they thought, *antipathically*, or for the tetanic contractions of the spinal, cervical, and other voluntary muscles, which commonly occur during the progress of that malady. This condition, however, is only apparently tetanic in many cases; it is really a *paralysis of the opposing or antagonistic muscles.* In such cases the Calabar is primarily homœopathic to the condition. If, however, the condition is really *tetanic*, it is secondarily indicated, for I believe a primary paralysis is often followed by a secondary tetanus.

In the former condition the attenuations (2x to 3x) would prove most useful; in the latter five to ten drops of the mother tincture every three or four hours, either in alternation with or followed by Secale θ in similar doses. I speak from my own experience, for I have the records of several cases, pronounced incurable, which recovered under the use of Calabar. A primary symptom indicating Calabar is *contraction* of the pupils; a secondary, dilated pupils. The heart's action is tumultuous, feeble, and irregular.

Idiopathic tetanus has been successfully treated with Calabar in

large doses. Many severe cases have been reported. It has also been efficient in tetanic spasm from Strychnia poisoning.

Certain *epileptiform spasms* have been cured by this medicine, but the details of the cases were given with that peculiar indefiniteness which belongs to allopathic reports, and I cannot give you the specific indications.

The action of Calabar on the *eye* is specific and unvarying. It is the opposite of Belladonna. It causes *contraction of the pupils* to the size of a pin's head, attended at first by a "twilight gloom," which wears off before the pupils dilate.

It causes *short-sightedness* in healthy eyes, and restores, temporarily, normal vision in long-sighted persons.

Astigmatism is a condition caused by Calabar. It has proved curative in several cases of *paralysis of the circular fibres of the iris* and ciliary muscles of one or both eyes.

In *prolapsus of the iris* from injuries, its topical application caused the retraction of the prolapsed portion and contraction of the pupil.

Oculists make extensive use of it locally when it is desirable to cause contraction of the pupil.

The provings of Beckwith, Chase, and Wesselhœft give some peculiar symptoms, but they did not use sufficient quantities to cause those distinctive characteristic symptoms which we require.

Beckwith found it to cause and cure a form of *dyspepsia* marked by great pain (pressure) *immediately* after eating. In this it is analogous to Dios., Arg. nit., and Bismuth.

I have cured many *obstinate cases of constipation* with Calabar. Also the trouble *flatulence* which so greatly annoys women at the "change of life."

It resembles somewhat, in its action, Agaricus, Gelseminum, Solanum, Conium, and Arnica, but no remedy is very closely analogous to it. It is one of those medicines which you will find have a *narrow* but decided action, and when indicated will act promptly and profoundly.

CAFFEIN.

This substance is the alkaloid of the Coffee bean. It is said that a cup of coffee, forming an infusion of 16.75 grams of dry

coffee, contains about 0.1 to 0.12 gram of Caffein; and an infusion of 5 grams of very good tea contains the same quantity of Caffein. The chemists have decreed Caffein and Thein are identical, but we cannot always accept the dictum of the chemist, for two substances may appear chemically identical, yet may possess different physiological properties.

It was once supposed that Caffein represented the principal qualities of tea, coffee, guarana, and some other substances used as beverages by various nations. But it is doubtful if such is the fact, for they all differ in effect, while the action of the Caffein is uniform. It is probable that coffee contains several other constituents in smaller quantities than Caffein, so that Caffein cannot be made a complete substitute for the "Coffea" which we have used in practice.

Dr. Aubert ("Pfluger's Archiv"), who has studied the effects of this substance on the nerves, muscles, respiratory movements, heart, and circulation, says *it increases the reflex excitability and may produce tetanus.* He considers this "a medullary tetanus, for it is produced in the frog if the ischiatic nerves are cut, and it takes place in a limb the circulation in which has been stopped by a ligature before the subcutaneous injection into the skin of the back."

Caffein has been used in the practice of European and English physicians, and also in this country, much as the Guarana (Paullinia) is now used, namely, for *nervous and sick headaches.*

Its pathogenetic power of causing excessive reflex excitability accounts for the virtues of Coffea, even in high potencies, in the nervous erethism of children and women, and shows that it may homœopathically prevent the accession of *tetanoid spasms* during intestinal irritation, or even the irritation of dentition.

It is therefore an analogue of Nux and Ignatia, but antagonistic to Scutellaria, Cypripedium, Calabar, and the Bromides (also Chloral).

But it has other curative powers which may be utilized. It has been found curative in *cardialgia, spasmodic asthma, hemicrania,* and *nervous palpitations.*

Coffee-drinkers are notoriously subject to crampy pains in the stomach, palpitation of the heart, and severe headache. A proof

that tea is not *identical* with coffee, is the fact that after the suspension of the use of coffee, and a resort to tea as a beverage, these symptoms disappear. Tea symptoms subside after substituting coffee.

I have used Caffein a good deal during the last few years, especially in *sleeplessness; nervous agitation after excessive pleasurable emotions; nervousness in teething children, and in women suffering from uterine diseases.*

I usually prescribe the 3^{x} trituration, nor have I ever observed any aggravations from it. On the contrary, it generally relieves, when Scutellaria or Ignatia fails. Sometimes Coffea 200 will act better than Caffein. This is probably due to some idiosyncrasy or extreme susceptibility. One of the pathogenetic symptoms of Caffein is "*flushing of the face.*" You will find it palliative of that symptom when occurring in women at the climacteric.

The *Bromo-hydrate of Caffein* exceeds Caffein in some of its sedative effects on the system. I have been pleased with the effects of the 2^{x} trituration, in *sleeplessness*, especially when there was frequent and watery urine.

Citrate of Caffein as Diuretic in Cardiac Dropsy.—Professor Gubler called attention some time since to the property of the Citrate or the Bromo-hydrate of caffein, given in doses of four to eight grains, in producing abundant and instantaneous diuresis in cases of cardiac dropsy, either when given hypodermically or by the mouth. Dr. Lewis Shapter ("Practitioner," January) adds to this his experience with the Citrate alone. The dose given by Dr. S. has not exceeded three grains in any case, on account of the nausea and vomiting produced by larger amounts. This has been sufficient, however, to establish copious diuresis as a general thing even in the most advanced stages of cardiac dropsy. In one of Dr. S.'s cases a pill of Citrate of caffein, three grains, was given at night. The urine previously passed had been to the amount of a pint to a pint and a half in twenty-four hours. During the first night after taking the pill, and the next morning, the patient, passed two and half pints of urine. Subsequently Citrate of caffein in three-grain doses was ordered in solution with Glycerin and water, and for six weeks, while this was continued, the amount of urine passed during each twenty-four hours amounted to from two to three pints. Other cases are detailed by Dr. Shapter, in which the Citrate of caffein acted equally well. His observations lead him to the opinion that Citrate of caffein occupies a "special" place as a therapeutic agent in cardiac disorder, its position being limited as a cardiac diuretic to advanced cases of cardiac disorders, or such advancing cases of cardiac disorders where muscular embarrassment and neurosal incoördinate cardiac ac-

tion (the indicators of progressive mural decay) exist. The existence of these symptoms appears clinically to forbid the administration of "tonic" doses of Digitalis so long as an outlet has not been effected from the venous system which shall coincidently, with more powerful cardiac contraction, relieve the stagnating pressure of venous blood on the right side of the heart. Citrate of caffein is (1) a diuretic. (2) It increases the heart's action, either (*a*) directly by stimulating the organ itself, or (*b*) indirectly by means of the arteries, which it also excites to further contraction. After discussing its physiological action at some length, Dr. S. concludes that, whatever may be the true theory of the action of Citrate of caffein, the opinion is forced upon him from observation, that in doses of gr. iii to to gr. vi it is a diuretic and cardiac stimulant of great value in cases of cardiac dropsy, where a dilated, feeble, and irregularly contracting heart, undergoing progressive mural decay, is the main clinical and pathological element to be contended against.—"Philadelphia Medical Times."

A recent German writer praises the Bromo-hydrate of caffein in doses of $\frac{1}{10}$ and $\frac{1}{100}$ grain (1[x] and 2[x] triturations) in dropsy from heart disease, especially when due to dilatation or failure of the circulation from cardiac debility. It seems to act better than the simple Caffein or the Citrate.

CALCAREA IODATA.

(*Iodide of Calcium.*)

This is a crystalline salt, soluble in water, but readily decomposed in the liquid state.

It has been used mostly in scrofula and tuberculosis. Administered in phthisis, it improves the appetite and digestion, and diminishes the cough and nightsweats. It has been used with considerable success in goitre and other glandular enlargements. The first decimal trituration is the best form for ordinary use.

CANCHALAGUA.

This plant was introduced as a remedy for ague, but its use was never attended with such success as to warrant its continuance.

While practicing in a malarious district many years ago, I tried it in many cases, but it proved useless. I do not believe it is now used, as it is rarely, if ever, ordered from our pharmacies. Its botanical identity is in doubt. The name above given is the vulgar name given it in California.

CANNABIS INDICA.

The marked and peculiar influence of the Hashish upon the brain and mind, has always given it a high rank as a supposed remedy in mania, insanity, and other disorders of the mind, but the experience of both schools has not realized the hopes of physicians.

It stands almost alone as a medicine that seems to possess the power of acting on the *soul.* It seems to give us some idea of the vast capabilities of emotion, comprehension and capacity for happiness and sorrow, which the soul of man possesses, but which lie latent while the body incloses it.

As a homœopathic remedy, it is indicated in all degrees and varieties of insanity, from profound depression to the highest exhilaration.

I can find recorded, however, but few cases of insanity where it has been of much service.

Dr. Gray reports its successful use in "*spectral illusions*, not accompanied by terror, caused by nervous fevers, puerperal mania, or religious excesses."

It ought to be useful in puerperal mania, with *nymphomania* (in a high dilution), but in two cases in which I used it, no curative results were obtained.

It is my opinion, that in order that it shall prove curative in mental diseases, they must be *purely psychical in their origin*, and not depend on any bodily ailment. In this respect it differs from Belladonna and Stramonium. In some affections of the *brain and nerves of the head*, the Cannabis takes a high rank. It is one of my favorite remedies in *nervous vertigo*, so called, which comes on after mental excitement, or remains after acute congestion of the brain. (Dose 2^x to 6th.)

Hemicrania, in its severest form, is often cured by the hemp, when all the usual medicines have been used in vain. The symptoms of the provings do not give us any characteristic indications, but the published experience shows that it is indicated *when the attacks occur periodically, every week or two, and are very agonizing, rendering the patients delirious or unconscious, leaving them pros-*

trated and nervous. The face is generally pale, the head cool, noise and light aggravate, but no vomiting occurs. In such cases it is analogous in some respects to Sepia, Spigelia, Arsenic, and Zinc. val. The *dose* most successful has been the mother tincture, 5 drops three times a day, as a preventive, and every hour during the paroxysm. This variety of neuralgia generally occurs in thin, delicate women, and has lasted for years. I am cognizant of some cases permanently cured by this plan of treatment.

Dr. Marcy claims for it great value in *subacute inflammation of the brain, delirium tremens, and hypochondria in females advanced in life.*

A prominent symptom in its provings is "involuntary shaking of the head," such as we see in some cases of palsy. (See Calabar.)

Since the third edition of "New Remedies" was published, the India hemp has been used successfully in many cases of *cerebro-spinal meningitis.* Both schools of medicine claim its use. It is undoubtedly homœopathic to that disease, as the pathological effects of poisonous and fatal doses on the spinal cord and brain, as well as the recorded symptoms, are very similar to those observed in that disease. My observation and experience lead me to restrict its value to the first stages of the malady, or the stages of *irritation and congestion.* After effusion or structural lesion has taken place, its action is not strictly curative, although it may prove a valuable palliative, and thereby aid indirectly in bringing about recovery.

The following indications were published in a paper on that disease contributed by me to the "U. S. Medical and Surgical Journal," 1873:

Delirium, generally gay; laughter, hallucinations, ecstasy, with or without loss of consciousness.

On regaining consciousness, violent shocks are felt passing through the brain.

Vertigo on rising, with stunning pain in the back part of the head, and he falls.

Fulness and throbbing in the forehead, as if it would burst, with sensation like a heavy blow on back part of head and neck.

Involuntary shaking of the head.

Fixed gaze; dilated pupils; redness of the eyes; throbbing, ringing and buzzing in the ears; sensitive to sounds.

Cold face, with drowsy and stupid look.

Stinging, burning, and scalding, before, during, and after urination.

Amorous paroxysms.

Anguish in the chest, with great oppression.

Pain across the shoulders and spine, forcing him to stoop, and preventing him from walking erect.

Entire paralysis of both lower extremities and the right arm.

Convulsions; emprosthotonos, with loss of consciousness; catalepsy.

Collapse; stupor; insensible pupils; pale, clammy and insensible skin; extreme debility; feeble, irregular pulse.

In that dreadful disease, *hydrophobia*, it is highly recommended as the surest palliative when death is imminent. The dose should be large and frequently repeated (gtts. xx to xl every hour, until quiet is obtained). In cases due to imagination, pseudo-hydrophobia, it will doubtless act as a curative agent in smaller doses.

Hysterical spasms and a host of hysterical manifestations ought to be controlled by Cannabis, for its symptoms are more closely allied to the hysterical malady than any drug in our Materia Medica. A healthy lady once took 10 drops—probably more—to see if it would cure mental excitement. It caused decided hysterical paroxysms, although she had never before had anything of the kind.

It causes *hyperœsthesia* of the auditory nerves, also the optic. Hearing and vision are curiously perverted. I have cured several cases of *tinnitus aurium* with the 3^{x} dilution.

It causes *canine hunger*, but differs from China and other medicines causing that condition in this, that *digestion* is equal to the emergency. One person records that "pastry and fat food, which previously he never ate without suffering from rancid risings and headache, are now digested regularly."

The *urinary symptoms* are very similar to those of Cannabis sativa. It is well known to botanists that the two are merely varieties, the Cannabis indica being the original and stronger species. If there is any difference in the symptoms, it is in the greater

effect the Cannabis indica has on the *nerves* of the urinary organs, as witness the symptoms of *paralysis of the bladder* and *spasmodic action*. On the other hand, the *blennorrhagic* symptoms are not so well marked, nor are the inflammatory.

Its primary action on the organs of generation of both sexes is that of an *aphrodisiac*, for which purpose it is largely used in the East. It causes *satyriasis, erotomania, nymphomania, priapism*, chordee, involuntary erections and emissions,—always with amorous dreams. Its secondary effects are just the opposite, and the Hashish-eaters of the East all become prematurely impotent. The homœopathic indications are evident. I often substitute it with good effect for Cannabis sativa.

Dr. Hirschel recommends it very highly in *profuse menstruation, menorrhagia*, and *hæmorrhage from the uterus of pregnant women*.

In the treatment of *dysmenorrhœa* it rivals Viburnum, Caulophyllum and Xanthoxyllum. It appears to control the *neuralgic and spasmodic varieties*, but is more particularly indicated when the patient is hysterical, emotional, and the menses are preceded, attended, or followed by unusual sexual desires. In allopathic practice it has effected some wonderful cures of dysmenorrhœa in women subject to neuralgia, and in my own practice it has relieved and cured patients who had been treated, ineffectually, for years, by uterine specialists, and with electricity. I use the 1^{x} tincture trituration, or the mother tincture, giving a few grains of the former, or a few drops of the latter, three times a day during the month, and every hour or oftener in severe cases, during the pain. My experience is, that it is useless to expect a radical cure by giving the remedy only during the paroxysms of pain. The system must be brought under the influence of the medicine, and kept under it, before the period of suffering arrives.

It has been claimed that as a *parturient* or *uterine-motor remedy* it is analogous to Secale and Caulophyllum. In a few cases where I have given it to accelerate *lingering labor*, it has seemed to have the desired effect. It is decidedly beneficial in the 1^{x} in *after-pains*.

Spasmodic asthma has often been promptly relieved by India hemp. One of its most prominent symptoms, which I have often witnessed from one dose, is:

"A feeling of suffocation, wants to be fanned; oppression of the chest, with deep, labored breathing; anguish, accompanied by great oppression, ameliorated in the open air."

When these symptoms are present, a few drops of the 1ˣ, every half hour, will give prompt relief.

Cardiac asthma will also be relieved by it, as the following symptoms show:

"Pressing pain in the heart, with dyspnœa the whole night; anguish at the heart; stitches in the heart, accompanied by great oppression, the *latter* relieved by deep breathings."

It has two other prominent heart-symptoms which may be remembered with benefit:

"Pain (stitches) in the heart, with palpitation, when lying on the left side."

"Palpitation of the heart, *awakening him from sleep.*"

Dr. Gray reports as cured a case of "*paralysis of the lower extremities,*" but he alternated it with Nux vom., which spoils the value of the report. Cannabis has, however, many symptoms of *paraplegia*, and may prove curative in some cases, *not* caused by any grave lesion of the cord, but functional in its character.

It ought to be an excellent remedy in *sleeplessness* from mental excitement, for *nightmare*, and for the *night-terrors of children;* also for a *sleep disturbed by vivid dreams*, which weary the patient.

I regret to say that you will find many "*Hashish-eaters*" in your practice. Its seductive influence is little less fascinating than Opium, and men and women are both driven by care and trouble to its use.

CARBOLIC ACID.

This powerful agent, introduced into medicine as a disinfectant is worthy a high rank as an internal remedy. The provings instituted by Drs. Hoyne and Mitchell develop the fact that its true analogues are Arsenicum, Baptisia, the Bromides, Cimicifuga, Creasote, Lachesis, Belladonna, Solanum, Sulphur, etc. Many of its symptoms remind us of the acro-narcotics; others of the corrosive poisons.

It is feared that it will meet the fate that Arnica meets at the

hands of the majority of our school. Hahnemann had a high opinion of Arnica as an internal remedy, and he gave us an excellent pathogenesis, but somehow the idea takes possession of the average homœopathist, that it is to be used solely as an external application, or if given internally at all, only in case of injuries. The fact is that Arnica is nearly as valuable as Bryonia or Nux vomica in a variety of internal diseases.

So with Carbolic acid. It will prove far more useful as an internal remedy than it ever has as a topical application. As a disinfectant even it has lately been deposed from the high rank once assigned to it.

My present estimate of Carbolic acid is, that its sphere of action is the *cerebro-spinal centres*, and that the disorders of the mucous surfaces, of the blood and secretions, of digestion, etc., are but the consequences of this primary action on the central nervous system. Its pathological action, when applied locally to any tissue, is that of a caustic, disorganizing the surfaces when it is applied in a peculiar manner. It causes an ulceration and sloughing, with tendency to putrescence. It is in this class of local lesions that its use, in very dilute solutions, will cure by its homœopathic relations.

It has been supposed by some that this acid cures diseases, external and internal, by its power of destroying certain *germs* which permeate the blood and secretions.

It is true that this substance destroys the life of animal and vegetable growths, such as infusoria, bacteria, vibriones, microscopic fungi, etc., quicker than any known substance, unless it be the Sulphite of soda. But this does not prove that it cures or can cure *all* diseases where these organisms abound in the fluids and solids.

In a majority of diseases these organisms are a *result* and not a cause of disease.

Just in proportion as the *nervous* life of the body becomes weakened, comes the tendency to deterioration of the solids and fluids, and finally the presence in them of animal and vegetable organisms.

Now, it is my belief that Carbolic acid has the same effect on

the human as on the lowest organisms, namely, the *destruction of the vitality of the nerve-centres.*

We will now take up the most characteristic symptoms of the drug, and compare them with the cures made with it, and see if the above speculations are borne out:

The *head symptoms* are quite prominent, thus:

"Feels as if a band was around the forehead." (Bell.)

"Dull pain, running from forehead to occiput."

"Burning in top of the head." (Sulph.)

"Constant dull pressure and pain in the occiput and muscles of the back of the neck, especially just behind the ears."

"A very great sense of weight on the neck, with a tenderness, even to the touch, on the seventh cervical vertebræ."

"Constant vertigo, not relieved by shutting the eyes; better when walking fast in the open air; much worse when sitting down."

"Constant humming, buzzing noise in the ears, with the headache, but without dulness of hearing."

"A full, dull, but constricted feeling in the head."

All the symptoms closely resemble the *headache and abnormal sensations from cerebro-spinal irritation*, and resemble the symptoms of Silica, Gelseminum, Calabar, Cannabis indica, and other irritants of the cerebro-spinal centres.

It has been used successfully, by myself and a few others, in the *headaches following meningitis, and "spotted fever;"* or the head symptoms occurring after *sunstroke;* for *sick-headache*, periodical, generally just before or after the menses.

The eye-symptoms are notable—they point to failing vitality of the optic nerve. I would call the attention of our oculists to these symptoms.

In *fetid, purulent* discharges from the nose, from any cause, its topical application, not too strong, will be attended by the best results (10 grains of the crystals to a pint of water). It may be injected with a sponge, or thrown up by an atomizer, or simply snuffed up. If it is done thoroughly, two or three times a day, the unhealthy nature of the discharge will soon disappear. In cases of *ulceration* it may have to be aided by Aurum, Silica, or Mercurius.

If the *infusorial* origin of *hay fever*, "*catarrhus æstivus*," is

proven, or even if it is caused by the pollen of plants, the injection of a dilute solution ought to cure that disorder. Helmholtz says Quinine cures it, and Carbolic acid has the same action, only more rapid, on such organisms.

In *aphthous* conditions of the mouth and fauces, if the odor is very offensive or cadaverous Carbolic acid washes are useful; if *not*, the Sulphite of soda or Borax are better.

In *diphtheria*, with fetor, the same observation will apply, but if fetor is not decided, I prefer *Phytolacca or Guaiacum.* In *ulceration* of the throat, syphilitic or not, the acid may be used as a gargle.

It is said to have cured "*spasmodic stricture of the œsophagus*," but the authority is not known to me.

In *caries of the teeth*, a plug of cotton, moistened with the officinal solution, and crowded into the cavity, destroys the sensitiveness of the dentine and abolishes the fetor.

As might be expected it has cured *vomiting of sarcinæ*, but Sodæ sulphite is just as effectual and much more safe; for, in order to be effectual, enough must be given to destroy the fungi, and prevent their propagation.

One of the most persistent of the symptoms in all the provings, was *morning nausea and vomiting*, and it has been very successful in the practice of both schools, in the treatment of the *morning nausea of pregnancy.* It cures *vomiting of ingesta* during pregnancy, and in children.

You may find it very useful in some of the many forms of *dyspepsia*, and flatulence.

Dr. Hoyne considers it indicated in attacks of "*diarrhœa from bad drainage.*" It may be useful in diarrhœa from drinking impure water. I have found it very efficacious in *cholera infantum*, attended with great prostration, hot head, fetor of the breath and all the excretions; the discharges from the bowels were putrid and like rice-water, or like the odor of spoiled eggs. In true cholera infantum, when the head is implicated, and the disease runs a rapid, malignant course, I have had the best success with Camphor, Bromide of soda, and Carbolic acid. I now rarely use Arsenicum, Veratrum, or other of the routine remedies usually recommended.

All the provers had *increased urine.* It is known to be diuretic, as is Creasote. I predict it will be useful in some of the varieties of *Bright's diseases,* and possibly in *diabetes.*

It is a favorite remedy in *pruritus* of the organs of generation, and of the perinæum and anus. Pruritus is often caused by ulceration of the os uteri, chronic vaginitis, aphthous conditions of the vagina and vulva. When these conditions are present, a weak solution should be used as an enema, and the same wash applied topically. One of its pathogenetic symptoms is, "itching of the scrotum and inside of the thighs; intense burning itching of the genitals."

As an application in ulceration, or granulation, of the os uteri, it is equal to Chromic acid.

Carbolic acid is, *par excellence,* the remedy for the *unhealthy discharges* from the uterus and vagina following miscarriage and natural labor. In the best-managed cases some small portions of membrane or scraps of placenta will remain and give rise to fetid discharges. I am in the habit of ordering the nurse to use enemas of Carbolic acid, of the strength of ten grains to a quart of water, twice a day, so soon as fetor shows itself. I believe by its use we may prevent the occurrence of pyæmic poisoning, or phlebitis, in the majority of cases. It may be alternated with Sulphite of soda.

In *uterine cancer,* its use is indispensable, either alone or alternated with the Sulphite of soda, or Bromo-chloralum. I may as well state in this place, as in any other, that the pretensions claimed for Carbolic acid, as a curative agent (when internally administered, in the attenuations), in the treatment of *cancer,* are without foundation. These claims were trumpeted forth by a once notorious surgeon belonging to our school of practice. The idea that infinitesimal quantities of this acid will exert any destructive action on the cancer-cells or germs in the blood or tissues of the body, is absurd in the extreme. I have carefully watched the progress and termination of the cases of alleged cures, and assert that in no single instance can I learn that the disease has been eradicated.

The *cough and laryngeal* symptoms are important. It causes "short hacking cough, with tickling in the throat. The cough is constant, irritating, and generally dry, or may end in expectora-

tion of thick *white* mucus." This resembles the cough of Rumex, but without the *excoriation* in the chest. It is an excellent palliative in this kind of cough, when occurring in *chronic laryngitis, bronchitis and consumption.* It may also act as a curative agent in these diseases in the early stages, if it is administered in a proper manner.

It should be prescribed internally, in the 3^x or 6^x, and used in a spray or steam atomizer, in about the same strength. It has one symptom similar to Lachesis, Hepar, and Stillingia, namely:

"*Left* side of larynx very sore when pressed upon—not the right side."

It is a favorite remedy with many of our school in *whooping-cough.* Some prefer it in the middle attenuations, others in the lowest, and a few claim brilliant results for its use when inhaled from an atomizer. If the infusorial cause of this disorder be true it ought to be the specific.

It is said to be of great value in *malignant scarlatina,* even when *coma* is present.

Dr. Middleton* reports several cases of confluent *variola* treated with Carbolic acid. He says: "The pocks began to dry up on the eighth day, tongue cleaned off, *no secondary fever;* the pocks were dry all over the body on the twelfth day." Dose: a few drops of the 2^x ever two hours.

It is an excellent plan to put a small quantity of the acid into the water with which patients sick with malignant fevers, etc., are bathed. It is enough if the water has a *faint* odor of the acid.

In *diseases of the skin* it has been found curative, when given internally and applied externally in the form of a lotion or unguent.

It *caused,* in the provers, "itching of the skin all over the body; vesicular eruptions, itching excessively, better after rubbing, but leaving a burning pain."

It is said to have cured leprosy, *prurigo,* pityriasis, lupus, carbuncles, indolent and *irritable ulcers,* acne, impetigo, *scabies,* and psoriasis. I have italicized those in which I have used it successfully.

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* Hahnemannian Monthly, April, 1872.

Since the pathogenesis in the first volume of this work was printed I have found the following case of poisoning by *Carbolic acid.* The symptoms of the *heart* are so important that I quote the case:

"A man of thirty years, suffering from stricture of the urethra, took by mistake a teaspoonful of a solution of Carbolic acid," containing, perhaps, twenty-five to thirty centigrams of the acid (two and one-half grains).

He felt a burning in the throat and œsophagus, and took some milk and water and a dose of Castor oil. After ten or fifteen minutes a slight tremor set in over the whole body, steadily increasing, followed by delirium, irritability and rage, with copious perspiration. His breath smelled slightly of the acid. At the attempt to examine his throat he closed his teeth tightly. The beat of the heart as well as the pulse could not be felt. Pupils were normal and reacted to light. The abdomen was bloated, especially in the epigastric region, but neither hard, nor tense, nor sensitive to pressure. He could not take medicine.

After about two hours he became more quiet, the sweating decreased, pulse and beat of the heart could not yet be counted. Instead of the tremors a somnolent state set in, the sweating ceased, the pupils dilated, but showed reaction to light. He swallowed now the most part of a tablespoonful of Magnesia. The pulse was irregular and intermitting, the veins appeared swollen and raised. Three hours after taking the poison the pulse became more regular and stronger, but frequent (120 to the minute), the pupils began to contract, the patient more quiet, answered rationally, and only complained of feeling languid. The pupils were now normal, the pulse full, and 100 to the minute. The oil showed now its action, but the fæces showed no smell of Carbolic acid. Later, he vomited twice a watery, thin fluid, not smelling of the acid. No pains in the stomach. He slept good, and when awakened complained only of some burning in the throat; fauces were slightly red, and showed some small gray spots, which soon passed off. The urine showed at first large quantities of albumen, after awhile it was clear, but of a dirty brown color; it never smelled of Carbolic acid. The dark color passed off gradually, but it remained albuminous for four days. Chemical analysis showed the acid in the dark-colored urine.

The most pregnant symptom in this case is the *relaxation of the activity of the heart;* if death had occurred at the beginning of the stage of the depression, following the primary stage of excitation, the paralysis of the heart would have to be considered as the causa morbis.—Schmidt's "Jahrb." 10, 1874.

Dr. Adams, Professor of Surgery, in Chicago Homœopathic College, writes of its uses in Surgery:

"Carbolic acid has been most extensively used, and so far has been rivalled in general utility only by Thymol. We can best illustrate the use of the method by describing, *e.g.*, an amputation. The surface of the part to be operated upon is thoroughly cleaned by sponging or irrigation with an aqueous solution of the acid of the strength of 5 per cent. (1–20). All sponges, instruments, etc., are carefully cleansed in a solution of the same strength.

"During the operation a weaker solution (1 per cent.), is used for washing sponges, and also in the form of spray, which by means of a suitable atomizer is thrown directly upon the field of operation so as to completely envelop the wound and its surroundings in an antiseptic mist. The amputation made, the vessels are secured by torsion, acupressure, or the carbolized catgut ligature* firmly tied in a square knot and both ends cut short. A drainage-tube is inserted, the edges of the wound brought into apposition by carbolized gut or silk sutures,† and the projecting end of the tube cut off flush with the level of the integument. The external dressing consists, first, of oiled silk, carbolized, known as "protective,"‡ its object being to protect the wound from any stimulant effects of the acid in the next application, consisting of eight layers of carbolized gauze,* under the top layer of which a piece of thin rubber cloth is placed to prevent the too rapid washing away of the antiseptic material from the gauze, by the

* Catgut Ligature.—Soak catgut of required thickness in carbolized olive oil, one part acid to five of oil, with a small quantity of water diffused through it to keep the gut supple.

† Sutures.—Silk may be rendered thoroughly aseptic by steeping in a mixture of beeswax 10 parts, Carbolic acid one part, the superfluous wax being wiped off the silk as it is drawn from the mass.

‡ Protective.—Oiled silk, lightly brushed with copal varnish on both sides. After drying again brush with a solution of starch and dextrin, so that it may retain a watery solution of the acid when dipped in it before application.

serous discharge from the womb. The spray is kept up continually from the beginning of the operation until the dressing is completed, and is used at all changes of the dressing until the wound is healed. It will be seen that the method depends for its success upon the principle of allowing nothing to come near the wound except it be first rendered aseptic. The drainage-tube should be of pure rubber, and is essential whenever the wound is of any considerable extent, as a free flow of serum follows the use of the spray. In most cases not more than from two to five dressings will be required, and may be made, in the absence of complications, at intervals of one, two, and three days, respectively. If suppuration occurs in a case under treatment after this plan, carried out in detail, it will be such as is not due to putrefaction, and the pus will be perfectly innocuous. Frequent meddling with wounds is to be avoided. As long as they do well they are better let alone. All materials needed now can be obtained at the surgical instrument stores ready for use, or may be prepared according to the above-mentioned formulæ.

CARDUUS MARIÆ.

This medicine, with an odd contradiction of terms, I should call the *oldest* of the new remedies. I found a pathogenesis of it in one of the early numbers of the "British Journal of Homœopathy," and if one-half its alleged powers are possessed by it, we should test its value thoroughly.

Its sphere of action seems to begin and end in the *liver and portal system*, and, so far as we can judge, from our present knowledge of its effects, all symptoms are the result, direct or indirect, of such action.

It is a close analogue of Bryonia, Chelidonium, Nux vomica, Podophyllum, Benzoic acid, Chionanthus, and Ammonium muriaticum.

It causes hypochondriacal depression of mind, vertigo, dull heavy pain in the forehead, over the eyes and in the temples, confusion of thought, bitter taste, nausea, pyrosis, eructations, distension, retching, vomiting of sour, green fluid, and many other unmistak-

* Gauze.—Mix paraffin sixteen parts, resin four parts, and Carbolic acid one part. Dip cheap muslin gauze in the mass and wring or press out while hot.

able "bilious" symptoms. Dr. Leidbeck asserts that no remedy more surely removes such symptoms. The same author has collected a number of clinical cases illustrating its powers, namely:

Morning vomiting of pregnant women; the food remains undigested all day.

Swelling and painfulness of the liver.

Jaundice (many cases). It is a very popular and successful remedy in domestic practice in Europe.

"Tenderness and hardness of the right hypochondria, especially in the left hepatic lobe; pressure there caused oppressed breathing and cough; stools brown, urine yellow, respiration asthmatic, expectoration thick and tough." These symptoms indicate *enlargement of the liver*, with sympathetic bronchial irritation, a condition in which Chelidonium and Muriate of ammonia are both now used very successfully.

It is capable of curing a more serious condition of the liver, for a case is reported of

"Pain in the liver, with œdema of the feet; scanty, bright urine, and asthma." It may prove useful in *dropsy from hepatic disease.*

Like Chelidonium, it has a great popularity in Europe for the cure of

"*Gallstones*, with jaundice, pain in the stomach, vomiting of bile, etc. Dr. L. cured two cases with half an ounce of the tincture in a pint of water, a tablespoonful every two hours. He does not say whether the calculi were expelled or dissolved, but the patients got well, and that was quite as satisfactory."

A case is also reported of "painful tenderness and *swelling of the gall-bladder*," probably from obstruction of the ductus choledochus communis, and which was promptly removed by the Carduus.

Among other clinical cases he mentioned

"Hepatic affections with hæmoptysis and croup.

"Portal congestion and obstruction, with its consequences.

° "Hypertrophy of the left hepatic lobe, with tenderness of the cervical and dorsal vertebræ.

° "Pain in the whole abdomen, near the cæcum, cramps, urine normal, complexion smutty, yellowish; sleeplessness, great emaciation, and hectic fever." An affection of the liver, primarily.

It causes tardy, knotted, and hard brown stool, followed by "stool soft, yellowish, thin, loamy, chocolate-colored, pappy, or without bilious tinge."

The urine at first is normal, but as the bile disappears in the stools, it appears in the urine, which becomes scanty, yellow, and finally brown.

This gives a complete picture of ordinary cases of jaundice.

Dr. Reil recommends it highly for "affections of the *climacteric period* in women, viz., megrim, metrorrhagia, leucorrhœa, asthma, with consensual disorder of the liver." This is similar to the action of Aloes, which is so useful at the change of life, when the liver is the suffering organ.

Dr. Reil narrates his experience with Carduus in an epidemic of *influenza with hepatic symptoms*, namely, a peculiar brown, dirty-gray complexion of the patient, sometimes a real jaundiced tint; sensitiveness of the left hepatic lobes to pressure; bright, pale-yellow, seldom dark-green stools; dark-brown urine, oppression of the chest, stitches in the side, debility, fever, frontal headache. Nux, Chelid., and Puls. did no good; only Carduus promptly cured.

Here in Chicago, during the months of March and April, we have similar epidemics. In several such epidemics I have found the Carduus indispensable for removing the hepatic difficulties.

It is one of the few remedies which is capable of controlling serious pulmonary symptoms resulting from disordered liver. It has cured "*painful cough* at night, obliging him to sit up in bed;" "*expectoration of pure blood*, or blood and mucus, generally connected with liver troubles;" "is palliative in the cough of consumptives and asthmatics."

It has an extensive popular reputation in Europe for "*stitches in the side*," generally the right, and nearly always connected with so-called bilious conditions. You will observe in your practice that severe stiches in the sides and chest often precede a "bilious attack." These "stitches" are said by Dr. Inman to be generally sympathetic, and are in the muscles oftener than in the liver.

In *pleurisy* it has some reputation, but it is not probable that Carduus is indicated in idiopathic pleurisy, but rather in pleurodynia (thoracic myalgia).

All the observers of the action of Carduus make this remark: "It relieves, but does not appear to remove the fever and oppression (in pleurisy) as well as Aconite;" which confirms the opinion I have just expressed.

CASTANEA VESCA.

It is a little singular that an infusion of the leaves of the common edible *chestnut* should prove a remedy for *whooping-cough;* but a Dr. Unzicker seems to have been very successful with it, if we can believe his report. He says: "I have found in all cases that it would, in from four to ten days, relieve the spasms of *pertussis*, and in about two weeks cure it. The little sufferers would whoop no more, but go on to a speedy recovery, to the great delight of myself and their friends."

He uses one-half an ounce of the leaves in a quart of water. This infusion was given in tablespoonful doses, every few hours. Later, he publishes further experience with the fluid extract in five to ten drop doses.

No experience has been published in the literature of our school since my first mention of it, nor have I had any good opportunity to test it.

I would suggest a trial of the tincture in some obstinate *spasmodic coughs*, for which it may prove useful.

Since writing the above, I have seen a report of Dr. Davis, in the "Philadelphia Medical Times," of a careful study of the effects of Castanea in whooping-cough, made in the Philadelphia Hospital.

Fifteen children were selected, all with severe paroxysms and the characteristic whoop. They had been taking other drugs, but were left without medicines two days, during which time the paroxysms increased in frequency and severity. After being put on Fl. ext. castanea, in doses of thirty to sixty drops every three hours, the paroxysms decreased rapidly, so that on the fifth day none occurred except in three cases. The nurse in charge, who had witnessed many epidemics of the disease, declared she had never seen a medicine act like it.

Since the last edition of this work, not much clinical experience relating to the use of Castanea has been published in the journals of either school. At the March meeting of the Obstetrical Society of the State of New York, Dr. Rodenstein reported eight cases of whooping-cough treated with Castanea. The average duration of these cases was three weeks, during which time the children took from two to five ounces of the fluid extract (30 drops four times a day was the usual dose). Several other physicians at the meeting stated that they had used it in smaller quantities with good results; all, however, testified to the superior curative influence of the Bromide of ammonium in severe cases. Such is my own experience.

CAULOPHYLLUM.

This is one of a class of remedies whose virtues seem to have been well known to the aborigines of this country. They called it "squaw-root," by which name it is known to the common people. Early pioneers, lay as well as professional, all bear witness to the high estimate placed on it by the Indians for the relief of the sufferings and weaknesses of the women of that race. It has another name, "blue cohosh," the origin of which I have not been able to ascertain.

Its sphere of action, as near as can at present be stated, is not extensive, but confined to the *small muscles and joints, the muscular tissues of the generative organs,* and possibly the motor nerves and mucous membranes.

The provings made do not throw much light on its general powers. Its clinical uses afford us almost all the data upon which we base our knowledge.

Its most prominent value seems to be its power of causing *intermittent contractions of the gravid uterus,* and possibly of the unimpregnated. In this it differs from Ergot, which causes, or tends to cause, *persistent contractions.* The remedies which most resemble it in this respect are Viburnum, Cannabis indica, and Cimicifuga. It has become very popular with a portion of our school, for the following conditions:

(1.) Deficient labor pains: (*a*) When they do not appear with sufficient vigor and regularity, at full term, and during labor.

(*b*) When the pains have disappeared from exhaustion. (*c*) When they are too severe and too painful, or are spasmodic.

In the two first instances it should be given in doses varying from one-fourth grain of the Caulophyll*in*, crude, to a grain of the 1ˣ or 2ˣ, frequently repeated; but in the last instance, to which condition it is primarily homœopathic, the dose should be from the 3d to the 6th, or higher.

I mention the active principle, because it seems to possess the desired powers of the medicine in a pleasanter form than the tincture, which, in its crude state, is quite irritating to the fauces. But the tincture can be used in about the same proportions, if necessary, substituting ten drops for each grain of Caulophyllin.

The same directions will answer for the dose in other conditions in which it is specific, namely:

(2.) *Spasmodic dysmenorrhœa*, when the flow is natural in quantity and quality. This distressing condition is often cured by Caulophyllin, but to be successful the medicine must be given several times daily during the week or two preceding the menses, as well as during the painful period.

(3.) *Spasmodic after-pains*, in which it is indispensable.

(4.) *Spasmodic pains in the uterus*, broad ligaments, etc., occurring at any time, from a cold, rheumatism, during pregnancy (false pains); also general as well as local spasms, from the suppression of the menses or lochia.

As might be expected from its powers, which I have just enumerated, it is a powerful agent for the *prevention of premature labor and of miscarriage*, provided the premonitions are pains of a spasmodic character.

The aborigines and earlier settlers claimed for it the power of preventing *tedious and painful labors*. This testimony has been substantiated by many prominent and trustworthy physicians of the eclectic school, as well as of the homœopathic. A few of our school have denied it such power, but the weight of the evidence is against them. Dr. A. E. Small is sure, from the observation of many years, that it actually prevents the unusual sufferings which many women undergo. He also testifies to the singular fact that many women who have taken it for such purposes have overrun their time to the extent, in some cases, of ten or twelve days.

The cases referred to, however, all had very easy labors and a good recovery.

My experience has been so uniform and conclusive on this point, that I do not hesitate to assert that it prevents not only a too painful labor, but it prevents those premature labors which are so common among the weakly women of this age.

You must not expect it to prevent painful labors (dystocia) in women who become advanced in life before they bear children, or in whom there exists any deformity of the pelvic cavity. Such cases are mechanical obstacles to easy, natural labors. Caulophyllum removes only abnormal functional causes.

The method of giving it in such cases is to prescribe a few grains of the 2^x or 3^x trit., or a few drops of the θ or 1^x dil., three times a day, for the last two weeks previous to the expiration of the term. If, however, a premature labor is feared at the seventh or eighth month, it should be taken during the two weeks preceding those periods.

Caulophyllum has been recommended for *rigid os uteri*, but I believe the rigidity is overcome, not from any specific power on the circular muscles of the os, but from its general action on the uterus. Gelseminum and Belladonna are better for this condition.

If *uterine displacements* are attended by periodic, spasmodic pains, Caulophyllum will form a valuable auxiliary to Sepia, Lilium, Nux, or Belladonna.

In my second edition of "New Remedies" was recorded a case of *paraplegia from retroversion*, which the Caulophyllum was supposed to have cured. We need further confirmation, however, before we accept it as a remedy for such condition.

It seems to be homœopathic to *rheumatism* of the *short muscles and small joints of the extremities*, and a few cases of that character have been reported.

It is said to be indicated when spasmodic pains occur in the stomach, intestines, and other organs, in sympathy with the same kind of pains in the uterus. There is no particular reason *why* they should always be in sympathy with that organ in order to render this remedy curative.

CEANOTHUS VIRGINIANA.

This shrub, called *Jersey tea*, derives its common name from the fact that during the Revolution, when Chinese tea could not be procured, it was used as a substitute, as were many other plants.

It is said that the infusion possesses slightly exhilarating effects. It would probably repay a good proving.

I found in the "Atlanta Medical and Surgical Journal" a communication in which it was stated that the Ceanothus possessed the power of curing *splenitis* and *enlargement of the spleen*. Dr. —— says:

"During the late civil war I used this plant for splenitis, and so well satisfied have I been with the results that for six years I do not remember using anything else for enlarged spleen. I have used it in the worst cases I ever saw, from infancy to old age. I have yet to see or hear of its failure in a single case, however inveterate."

This is pretty strong and positive testimony, and the author fully confirms my idea that a remedy which cures is homœopathic *always*, for he further says:

"In chronic cases, when the organ is no longer tender, under the use of the tincture, even without friction, it *soon becomes painful and tender*, then sinks rapidly to its normal size, and so remains, the patient no longer being conscious of its presence."

We see here a true homœopathic *aggravation*, showing that the drug has a specific affinity for that organ.

I would advise you to make use of it when you meet with cases of "*ague cake*," so common in malarious districts.

The tincture is made from the leaves, and is given in drop doses of the θ or 1^x dilution and applied to the region of the spleen.

Dr. Carroll Dunham informs me that a physician of his acquaintance cured an enormous enlargement of the spleen by the use of this remedy.

It is not a little singular that since the first mention of Ceanothus in the third edition of this work, no clinical reports of its use in disease have been reported in American journals. It remained for an English physician, Dr. J. C. Burnett, to discover its affinity for splenic disorders. In an article in the "Monthly Homœopathic Review," of March, 1879, entitled "Ceanothus Americanus in its Relation to Diseases of the Spleen," he says:

For several years past I have been in the habit of using this drug in true Rademacherian fashion as an organ remedy. The perusal of Rademacher's "Magnum Opus" is one of the greatest literary treats that ever fell to my lot; based on Hohenheimian bizarries, avowedly and obviously merely an attempt at reducing his genial, erratic, *pretended* mysticism to the concrete form of a practice of medicine, by depolarizing it, if I may so speak, it is nevertheless the most genial and most original production it is possible to find in medical literature. It is one of the most bareboned lawless empiricisms that one can conceive, and yet there are two leading ideas running through the entire work, and these are the *genius epidemicus morborum* and organopathy; and considered from the pharmacological side, the other two ideas of universal (general) and particular medicines. For Paracelsus there were only *three* universal remedies, and so also for Rademacher and for their followers. Hahnemann has but *three* fundamental morbid states, psora, syphilis, and sycosis. Von Grauvogl has but three constitutions of the body—they might have all been working out the fatherlandish proverb, *Aller guten Dinge sind drei!*

The *genius epidemicus morborum* is beyond question a fact in nature, but it is dreadfully eel-like, hard to get a grip of. The same may be said of Hahnemann's tripartite pathology and of Grauvogl's three constitutional states.

Rademacher's organopathy (that an otherwise able modern writer appropriates with childlike *naïveté*) is no more and no less than the homœopathic specificity of seat, with just a dash of a mystic psychic something in the several organs; if we set aside this little particular soul for each organ, it is only local affinity, or elective affinity. And it is quite true in nature, and the mind that cannot, or will not, recognize it, is wanting in catholicity of perception; and *in practice will often go a mile when three paces would have reached the goal.* Whatever else Cantharis may be, it is first and foremost a kidney medicine; whatever else Digitalis may be, it is primarily a heart medicine; and let Belladonna be what it may, it is before all other things an artery medicine, and just in this sense Ceanothus Americanus is a spleen medicine.

The spleen constitutes a dark corner in the human economy, whether considered physiologically or therapeutically. I have heard it professorially very ably argued that the spleen is the principal manufactory of our blood-corpuscles. I have heard that theory equally, ably, and professorially refuted, and in its stead the thesis set up that the spleen is, as it were, the *ultimum refugium* of the old and effete blood-corpuscles, wherein they are broken up and their *débris* sent off again into the circulating medium. A third argued that all this was veritable nonsense, as the spleen had nothing whatever to do with either making leucocytes or breaking up their reddened descendants, that in fact the spleen had no other function than to act as a reservoir for the blood, being, indeed, a kind of living sac in the side, to swell or shrink, according as the circulation required more or less of the circulating fluid.

I fondle this latter theory myself, and like to call it mine. Whose it really is, I do not know. Perhaps the erudite editors will kindly add a footnote and say what they think the spleen is good for beyond serving as the anatomical whereabouts of that enigmatical something that supposedly sends my dear fellow-countrymen in shoals off London Bridge into the Thames on a rainy or foggy

day—I mean, of course, *le spleen!* This great bugbear of our Gallic and Germanic brethren—as applied to ourselves *bien entendu!* for they consider it essentially a *morbus Anglicus*, just as we like to think it is principally those naughty French who commit suicide—is really only another name for being "hipped," or suffering from an attack of hypochondriasis, and there cannot be any sound reason for refusing it a habitat under the *left* ribs, since so many have welcomed it under the right ones.

My first and only literary acquaintance with Ceanothus Americanus is the very short empirical account of it in Hale's "New Remedies," which I read some five or six years ago. Previously I had frequently felt a difficulty in treating a pain in the left-side, having its seat, apparently, in the spleen. Myrtis communis has a pain in the left side, but that is high up under the clavicle; the pain that is a little lower is the property of Sumbul; still lower of Acidum fluoricum; a little further to the left of Acidum oxalicum; more to the right of Aurum; right under the left breast of Cimicifuga rac.

These remedies promptly do their work when these left-sided pains are a *part* of the diseased picture, but they will not touch the pain that is deep in behind the ribs of the left side; more superficially Bryonia has it; a little deeper than Bryonia, Pulsatilla nuttal. will touch it; and so will Juglans regia, which poor Clothar Müller proved as a student. But the real splenitic stitch requires China, Chelidonium, Berberis, Chininum sulfuricum, or Conium, or Ceanothus Americanus.

Some years since I treated a lady in Chester for "violent vomiting, pain all up the left side, cough, with expectoration, profuse perspirations, and fever." She was not a Cestrian, but came only for a short visit, and took lodgings in a small house facing a meadow on the banks of the Dee; the locality was at one time a part of the port of Chester, but was many years ago reclaimed. At my first visit she told me she often got inflammation on the chest with cough, and finding considerable fever, cough, pain in the left side, and dulness on percussion of the same side, I quickly ticketed it *pleuropneumonia sinistra*, and gave Acidum oxalicum, which seemed to cover all the symptoms, and to correspond also to the supposed pathological state within. Oxalic acid somewhat relieved the vomiting, but nothing more, and I then gave various remedies, such as Aconite, Bryonia, Phos., Ipec., and thus elapsed about three weeks, but patient remained as ill as ever. Then I went into the case with very great care, and examined my patient very thoroughly, and, see, there was *inflammation of the spleen*. I gave her Ceanothus Americanus in a low dilution, and all the symptoms, subjective and objective, disappeared right off, and my previously ill-treated patient was sitting up in a week, and quite well in a few more days. I had never before met with splenitis in the acute form, and have never since met with it.

A few cases of chronic pains in the spleen occurred subsequently in my Chester practice, and they rapidly yielded to Ceanothus, one of which I well remember; it is this:

Chronic Splenitis.—A young lady of about 26 consulted me for a chronic swelling in the left side under the ribs, with considerable cutting pain in it. She stated that it was worse in cold damp weather and she always felt chilly; the chilliness was so severe and long lasting that she had spent the greater part of her time during the previous winter sitting at the fireside, and now she was looking forward to the winter with perfect dread. In the summer she had felt nearly

well, but the lump and the chilliness and pain nevertheless persisted, but it being warm she did not heed it much, it being quite bearable.

Ceanothus Americanus quite cured her of all her symptoms, and subsequent observation proved its permanency. Often during the following winter she called my attention to the fact that she was not chilly and felt well.

One of the first cases I treated at the Wirral Homœopathic Dispensary in Birkenhead was that of a young man somewhat similarly suffering.

Chronic Splenitis.—This young man was sent to the dispensary by the then manager of Messrs. Thompson and Capper's Birkenhead establishment, and was occupied in the Liverpool post-office in some light but ill-paid employment. His whole trouble consisted in *severe pain in the left side in the region of the spleen*, and he had long vainly sought relief of many, probably at dispensaries. He therefore put in an early appearance at my new dispensary to try the new doctor, probably on the well-known principle of the new broom. He had become quite low-spirited and began to fear he would become totally unfit for work, and naturally that was a very serious matter for a young married man. He told me he had formerly helped his wife in her household matters, doing the heavy rough work, but the pain in his side had now become so bad that he could not carry a bucket of water into the house or even sweep up their little yard, as handling the broom pained him so dreadfully. I was pressed for time, and prescribed Ceanothus Americanus in pilules of a low dilution, and promised to go into his case that day week, meaning to percuss the part and ascertain whether the spleen was enlarged. He returned that day week almost well, and the following week was quite well. At my request he again reported himself some time afterwards, and he still continued well.

I resolved to begin my next case with the physical examination. My next case was this—

Chronic Hypertrophy of the Spleen.—A middle-aged lady consulted me shortly after the above case, for a *severe pain in the left side and a large swelling in the same position.* Remembering the last case I said I must examine the side. She objected, so I declined to treat her; then she said she would think about it and consult with her husband on the subject. In a fortnight or so she returned (driven by the severe pain in the side), and I examined the side and found an enormous spleen occupying the entire left hypochondrium, and reaching inferiorly to about an inch above the crest of the ilium; it bulged towards the median line and ran off to an angle literally. It was of long standing.

Gave Ceanothus Americanus in a low dilution.

This lady being very intelligent I begged she would allow me to examine the side again after I had finished the treatment. She promised to comply.

Fourteen days after this she came full of gratitude and reported that the swelling was smaller and the pain considerably less.

To continue the medicine. She never consulted me again, but as she was a near neighbor of mine I often saw her, and somewhat six months afterwards she called to pay my fee, and then informed me that she had soon got rid of the pain entirely and the swelling was much smaller, so she had discontinued the medicine altogether, and did not deem it needful to trouble me again.

This is the usual thing. People will not be at the trouble of seeing the doctor as soon as they are better; they seem not to understand any interest one feels

in the case. We can only make periodical reliable examinations of patients in a hospital; in private practice it is extremely difficult, as all practitioners know to their chagrin. Still, *faute de mieux*, we must put up with those fragments. This patient had had no children, and had a very fresh complexion.

My next case is also one of *chronic hypertrophy of the spleen*, though only about half the size of the one just narrated. Subject, a poor woman of about thirty or thirty-two years of age, whom I was requested to see by a very kindhearted benevolent lay minister well known in Birkenhead and the neighborhood. She is the mother of several children, very poor, ill-fed and overworked, but withal a good respectable woman and very clean. She had a considerable and very painful swelling in the left side under the ribs, that had been there for some time, and latterly she could not get up on account of the severe pain. I carefully examined the tumor and satisfied myself that it was a very much swelled spleen, and the pain seemed to me to be due to its pressing against the ribs. I marked its size on the skin with ink, made her engage not to wash off the ink-mark, and promised her I would call in a week, having first prescribed Ceanothus as in the other cases. But the fates were against my laudable plan, for I received a message, the day before my next visit was due, to the effect that Mrs. —— felt herself so much better that she was up at her housework, and begged me not to call again, as she thought it unnecessary.

Since then I have at times had cases of deepseated pain in the left side to treat, and have mostly found it yield to Ceanothus, though not always. In one case in which it failed the pain was cured with Berberis vulgaris.

In one case of jaundice, characterized by very severe pain in the *left* side, I gave Ceanothus, with very prompt relief of the pain only; Myrica cerifera then finished the icterus. Before giving the Ceanothus I had given Chelidonium majus.

In one case of severe metrorrhagia, characterized by pain in the left hypochondrium, Ceanothus gave instant relief to the pain, and checked the hæmorrhage. It failed me in a subsequent similar attack in the same person, when Conium was effective, and was suggested by Dr. Thomas of Llandudno.

Chronic Splenitis, Chills and Leucorrhœa.—Some four years since, perhaps a little more, I treated a lady of about 55. She complained of rigors at frequent intervals, and pain in the left side, both of long standing.

The leucorrhœa had lasted some twenty years, and was profuse, thick, and yellow. She had been for years under the best allopathic physicians of Chester, and finally given up as beyond the reach of medical art, evidently on Molière's principle that "*nul n'aura de l'esprit que nous et nos amis.*" Nevertheless, the patient bethought her of homœopathy, and came under my care. Her last physician had finally suspected cerebro-spinal mischief, and hinted at incipient paralysis.

The pain in the side was the most prominent and distressing symptom, and for this I prescribed Ceanothus. In a month the pain was entirely cured, *and also the leucorrhœa*, while the cold feeling was very much diminished, but not quite cured. I have also never succeeded in quite curing it with any subsequent treatment. I watched the case for nearly four years, and am thus enabled to state that the pain in the side and the leucorrhœa never returned, and the chilli-

ness never again became very bad, but still she had it a little when I saw her last.

Cases calling for this remedy are not very common with me, but every few weeks I meet with one. Thus, since coming to London, I have met with one such, viz., a girl, Ada, æt. 14, who came under observation on Nov. 29, 1878, with *pain in the left side for some months*, and *right*-sided headache. She received Ceanothus 1 in pilules.

Dec. 13. Cured of pain in left side, head better. Pergat. Did not return.

Ceanothus Americanus never having been proved, at any rate as far as I know, I have always used it about 1ˣ or 1, and sometimes in the mother tincture.

Most of the persons with these splenitic disturbances, were in fair condition, and many complained of nothing else; many were women, and two of these were drunkards; many had "chills," but not all; none had ever had ague.

As a first contribution to a proving, I will add two or three data.

PATHOGENESIS OF CEANOTHUS AMERICANUS.

1. It very frequently relaxes the bowels, and I have known this even amount to diarrhœa.

2. Ceanothus Americanus 1, four drops in water three times a day was once given by me to a young lady (26) for *severe pain and fulness in left side, with inability* (for years) *of lying on left side.* In a few days she could lie comfortably on either side, and the pain in the side was said to be nearly well. This was my second visit, and I said go on with the medicine. She did, and I took these notes at my next visit:

"Had been taking it for about a fortnight, when one day I felt *great nervous excitement, with chilliness, loss of appetite;* felt as if the nerves were shaken, and one day at dinner could scarcely hold knife and fork." The chilliness was chiefly down the back; she *shivered with cold chills* (*i. e.*, rigors).

Thinking these symptoms were due to the medicine, she left it off for two days, and the symptoms entirely passed off. Then she resumed the medicine for one day, and the same symptoms again appeared; she again discontinued the medicine, and again the symptoms ceased. *Her bowels were relaxed.* Subsequently her *menses appeared ten days too early, and very profusely*, a thing that had never happened before in her life, as her mamma informed me.

I mentioned this medicine to Dr. R. Hughes at the Manchester Congress, and Dr. Edward Madden and I partly agreed to prove it; I am not aware whether this gentleman has ever done it; if so, he has done more than I have in the matter; still it is obviously worth proving, for our good spleen medicines are not very plentiful.

I have several times had the honor of calling attention to Ceanothus Americanus at the various meetings of the Liverpool Homœopathic Medico-Chirurgical Society, but do not remember ever hearing any of the members mention having used it; they probably never need it, or very properly object to using an unproved drug as a remedy. Also as no notice of it ever appears in our journals it is probable that it is not a usual remedy with the profession.

We are overwhelmed with new remedies, and certainly need rather a better knowledge of what we have than the addition of any fresh ones. I therefore

think it would be a useful undertaking for some one to prove the needlessness of Ceanothus by showing how *deepseated pain in the left hypochondrium, acute and chronic splenitis, hypertrophy of the spleen, etc.*, can be more promptly cured than I here show. Some one living in a malarious district would have a good opportunity of showing its worthlessness in ague cases also.

CERASUS VIRGINIANA.

This tree, the inner bark of which is officinal, is also known as *Prunus virginiana.* There is another species known to botanists as *Cerasus serotina* (Prunus serotina). The latter is the common *black* wild cherry; the former a *red* wild cherry, known as "choke cherry."

The plum and cherry family, as well as the peach and apricot, the bitter almond, and laurocerasus, all contain the elements from which hydrocyanic acid is evolved.

When properly prepared the infusions or tinctures of these agents all contain that acid, upon the presence of which nearly all of their peculiar effects on the heart depend. But the cherry family also contains Tannin, and a peculiar bitter principle, which resembles Cinchona somewhat. A cold infusion of the inner bark is the best preparation. If prepared by heat the acid is not formed. A tincture may be made which contains all its active principles; but the fluid extracts and the so-called prunin and cerasin are frauds. They contain only the tannin and bitter principle.

From time immemorial the cold infusion has been in use for *irregular* and *intermittent action of the heart, with deficient impulse.* For this condition Hydrocyanic acid, Laurocerasus, Iberis and Amygdala are primarily homœopathic; and Digitalis, Lycopus and Collinsonia are secondarily homœopathic.

With the cold infusion in tablespoonful doses I have frequently removed the above abnormal condition of the heart's action; also the *cough* sympathetic with functional or organic disease of the heart.

It is a valuable palliative in *quick, weak pulse,* during convalescence from disease; during phthisis; and in *hypertrophy of the heart with dilatation.*

The tincture made with dilute alcohol has been useful in my practice for *dyspepsia* with *tendency to acidity of the stomach; in*

slow digestion with pyrosis; loss of appetite, etc. It is all the more indicated in these affections if they are attended by *weak, irritable heart.* I have found it much more efficacious when Pepsin (the saccharated powder) is given before each meal, followed by the Cerasus *after* meals.

I have known cases where excessive quantities of the infusion have caused a fulness, and a dull, heavy feeling in the head. This may have been due to the cardiac tonicity which it caused, and implies that we should not give the lower dilutions in concentric hypertrophy of the heart, or when real fever is present. In the higher dilutions it might prove useful for the symptoms mentioned.

CEDRON.

Cedron is the *seed* of the fruit of the *Simaruba Cedron*,—according to Hooker's London Journal of Botany.

Teste's "Materia Medica," p. 577.

"North American Journal of Homœopathy," vol. viii, p. 120.

"Monthly Homœopathic Review" (London), vol. v, pp. 164, 208, 251; vol. vi, pp. 71, 136, 203.

"New Remedies, Symptomatology of," 4th edition.

According to Dr. S. A. Jones, in the latter work:

The earliest mention of the Cedron is found in the "History of the Buccaneers," A. D. 1699.

The native Indians first offered the seeds for sale in Carthagena in 1828.

Analogues. Arnica, Cinchona, Cornus, Cimicifuga, Eucalyptus, Eupatorium perf., Gelseminum, Nux vom., Sepia, Sanguinaria. It has some analogous relations to Pulsatilla, Chelidonium, Lachesis, and other polychrests.

The *sphere of action* of Cedron appears to include both the *cerebro-spinal* and *sympathetic* systems, and is a decided "anti-periodic" remedy.

"Its chief characteristic is a *periodicity*, which is often clock-like in its regularity." (Dr. S. A. Jones.)

The *clinical uses of Cedron* have been mainly confined to *obstinate intermittents*, which resist the usual ague remedies. After the appearance of Teste's "Materia Medica," the demand for it was very

large, especially from Western and Southern physicians. At that time a few clinical reports were published favorable to its efficacy in ague; but very many failures were also reported. It did not give general satisfaction. But now that we have a fuller pathogenesis, it will probably be selected with greater certainty. The general opinion, with which I coincide, is that *cerebral congestion* is one of the keynotes for its use in ague. To illustrate this, I copy some of the head symptoms collected by Dr. Jones, and published in the 4th edition of "New Remedies."

"Head dull and heavy in the morning; distensive headache, increased during the night; temporal arteries enlarged; bending the head backward, with pressure on the occiput and parietal regions, as if these parts were going to burst; forehead cold, as if it were empty, in the morning." All these symptoms were more marked in the women than in the men.

"Pressure at the right temple, causing a dull pain in the whole right side of the head, disappears wholly toward noon; heaviness in the head; headache increases in the open air (toward 9 A.M.); pressive pain over the eyes, as if a band were tied round the parts; pressure at the top of the head, slight in the daytime, somewhat violent just at the moment when the shivering begins; it never wholly ceased during the whole proving; towards 6 P.M. shuddering, soon followed by a dull and heavy frontal headache, spreading to both parietal regions; pulsating sensation in the temple, and a twisting pain behind the right ear, changing to a dull pain and extending to the temples; head felt as if swollen; whole head feels swollen and heavy, most on the right side; pressure on the occiput in the morning; in the forenoon, occasional sharp jerking pains in the occiput; successive sharp pains in the occiput, abdomen, and lower limbs. These pains in the head are dull, except those in the occiput, which are acute. At 10 P.M. dull pain in the top of the head, with sharp flying pains in all the joints of the extremities, worse in the feet, particularly the first joint of the great toe; awoke late A.M., after a sound sleep, with dull pain in the vertex; awoke with dull pain in the whole upper head; throbbing in the temples; throbbing in the temples increasing to pain; pain across the forehead, over the eyes, from temple to temple; beating in the temples, increasing

to pain and extending over the ears; throbbing in the temples, increasing to pain, and extending over the eyes; throbbing pain in the head, commencing in the temples and extending around the forehead; sharp pain in the occiput; dull pain in the vertex; pain over the ears; headache, especially in the bottom of the orbits (compelling him to close the eyes), and extending to the occiput."

The resemblance to the China headache is very marked. These headaches are decidedly periodic, and the following clinical cases illustrate its efficacy in this direction:

1. Tearing, shooting pain on the left orbit, extending to the inner canthi and to the superciliary ridge of the os frontis. This pain came only *post coitu*, and when the circumstance had occurred which gave rise to it, his sufferings were so intense on waking in the morning that he was compelled to keep his room for several days, and was unable to eat or drink during the greater part of that time. 2. A similar pain over the left eye followed involuntary nocturnal spermaperthy in the case of a woman; pain came on when waking in the morning, and was very severe until noon. 3. Chronic intermittent headaches, with shooting and pressing pains in different parts of the head, recurring at certain periods of the day or night.

The eye-symptoms somewhat resemble those of Gelseminum; also Pulsatilla and Cimicifuga.

"Eyes protruding and red, with pressive pain extending to the forehead; pupils fixed and dilated; objects appear red at night and yellow in the daytime; eyelids injected bright red, and painful when pressed; enlargement of the meibomian glands and conjunctiva; smarting in the eyes, especially when closing them; sensation in the eyes as if one had wept a good deal; itching of the eyes; dimness of the sight; the left eyelid seemed dried to the ball; conjunctiva inflamed and dry; when exposed to the air the eyes feel dry; eyes felt swollen; misty vision, as from thick smoke; dizzy, could not see to light a candle, and could not tell when it was lighted."

It has cured ° flashes of light before the eyes; ° dull appearance of the eyes; ° tumid face, with pupils much dilated; ° a pe-

culiar, unsteady, glistening appearance of the eyes, and intolerance of light.

It has many of the ear-symptoms of China:

Singing in the ears as of crickets; buzzing of the ears toward noon; hardness of hearing at night; it antidotes the effects of Sulphate of quinine on the auditory nerves.

Its value in *facial neuralgia* is substantiated by the following clinical cases:

° Prosopalgia, more frequently in women than in men, generally on the right side, recurring in regular paroxysms of indefinite duration, with spasmodic distortion of the muscles corresponding to the affected region (the *zygomatic* process almost always). ° Chronic intermittent prosopalgia always coming on at 7 or 8 P.M., and lasting from two to four hours.

"In facial, especially supraorbital neuralgia, in more than one instance a single dose was sufficient *where the periodicity was well marked.*" Dr. Liebold, "New York Journal of Homœopathy," vol. i, p. 362.

Its action on the throat is quite specific. The following case contains its peculiar symptoms:

° Mouth and tongue very dry; difficulty of speech; great thirst all the time; painful pricking of the tongue, with a sensation of heat; she felt at times as if the tongue was paralyzed; face pale; deep-sunken eyes; odontalgia every night; fetid breath; lips cold, bluish, dry; now and then slight bleeding of the gums. These symptoms *appeared only with the catamenia*, and lasted as long as that discharge, at the termination of which she had a profuse ptyalism and leucorrhœal flow.

The gastric symptoms remind one of *Arnica*, especially in the *amelioration by eating*, thus:

Eructations of bitter wind from the stomach before rising in A.M., with dull pain in the temples; sensation as of a stone on the stomach; rolling pain in the stomach; sensation of heat and fulness in the stomach; distension of the stomach and disposition to nausea, generally aggravated by rest, but relieved by walking, and by eating; ° uncomfortable feeling of the stomach, which obliged him to lie down; great sensitiveness of the præcordial region; pulse small and hard; dryness of the mouth and fauces;

depressed spirits and inquietude *relieved by food and drink.* These symptoms appeared every day from 10 to 11 A.M., lasted from one to two hours, after which there was prostration of body and mind for an hour or two.

The following cases illustrate its curative power over abnormal *stools* and *urine;* it ought to be useful in *cholera infantum,* with tendency to brain trouble:

° Semiliquid, whitish fæces, somewhat like starch; white, frothy, and papescent evacuations immediately after meals, accompanied with slight colic and discharge of inodorous wind; ° involuntary discharge of urine and fæces.

° Scanty urine; profuse emissions of watery urine; frequent emission of large quantities of pale urine; frequent ineffectual urging to urinate; dark urine with sediment; urine of a dark-red color; scanty urine and deep yellow color; frequent desire to urinate; ° urine very high-colored; ° urine precipitates a branlike sediment; ° involuntary emission of urine; ° a great deal of pain in the kidney.

The *genital symptoms* are not as prominent as the cures alleged to be made, namely:

° A *tic-like* pain over the left eye, for more than thirteen years, with the singular circumstance that such a pain *never* came on except *post coitu* (radically cured in 3 days); ° involuntary nocturnal spermaperthy (in a woman). ° *Post coitum,* irregular and uncontrollable movements of the left upper and lower extremities, and of some portions of the face, manifested by grimaces and contortions of different kinds; these symptoms lasted from fifteen to twenty minutes. She could not speak without stammering, and her respiration was very much affected. She also had involuntary discharge of urine and fæces at times during the attack (*choreic*). ° Leucorrhœa regularly every month, five or six days previous to the appearance of the catamenia, with pain in the uterus and enlargement of the vulva; ° leucorrhœal discharge appearing in the place of the catamenia. Menstrual epilepsy (epileptoid convulsions), precursory symptoms of which were manifested precisely the same day that the catamenia commenced; vertigo, *tinnitus aurium,* and irregularity in the action of the heart; then the *aura epileptica,* followed with loss of consciousness and falling; a

distressing cry, now and then alternated with *risus sardonicus* and slight foaming at the mouth during the attack. ° Epileptiform eclampsia (hysteria); attacks came on regularly twice a day, morning and evening, at the same hours, with these symptoms: intense pain in the forehead; tumid face, with pupils much dilated; then a feeling of giddiness, resulting in her falling down in the most distressing convulsions; insensibility, closed teeth, and frothy secretions from the mouth; difficult respiration, irregular pulse, and palpitation of the heart—the whole lasting for six or eight minutes. On recovering consciousness she felt very weak, and discharged a large quantity of inodorous urine as clear as pure water (primipara, in seventh month of utero-gestation).

The *nerves of the larynx* are evidently irritated by the drug, reminding us of the action of Lachesis and other serpent poisons. (It is considered almost a panacea for the bites of serpents in the countries where it grows.)

° Larynx constricted and tender; difficuly of swallowing; difficult respiration with partial loss of voice recurring at intervals; ° breath cold; ° hurried respiration and feeling of suffocation in the throat; ° chronic intermittent laryngitis, the attack comes on every evening, with shivering chills, lasts about two hours, terminates with a profuse perspiration; ° suffocating fits regularly every day from 10 to 12 o'clock; there are sensations of choking or stifling; difficulty of breathing, obliging her to stand in an erect position; enlargement of the tonsils during the attack, with redness of the velum palati, and constant need of swallowing—all these symptoms were aggravated after sleeping, and mitigated by eating; ° troublesome cough, coming on regularly every morning at about 6 o'clock, and lasting from two to three hours; the patient was perfectly free from it during the rest of the day.

We see the similarity to Lachesis again in its effects on the *cardiac nerves*, especially on the accelerators and regulating nerves.

Oppression of the chest and throbbing of the heart; oppressive pain in the chest every now and then, extending to the back, with frequent desire to moan and take a long breath; palpitation of the heart and hurried breathing, with headache; pulse increased from 12 to 15 impulses per minute, in from twenty to thirty minutes after the dose. (This was a constant phenomenon in all

the American provers—three women and two men. The doses were from one to three drops of the matrix.)

° It has cured irregularity in the action of the heart; ° irregular pulse and palpitation of the heart; ° rapid intermittent pulse, impossible to reckon the strokes; also, palpitation of the heart, rapid and intermittent. The oppression of the chest and throbbing of the heart occurred in nearly all the provers in whom febrile paroxysms were developed.

Many of the symptoms of the *spinal region*, such as "stiff-neck," "*pain all along the spine*," verified by cures, point to its homœopathicity and possible usefulness in *cerebro-spinal meningitis*, especially when the cerebral, laryngeal, febrile, and spasmodic symptoms correspond.

I quote the *fever symptoms* in full, as a guide to its future administration in *ague*:

1. Feverish paroxysms every day in some provers, every other day in others, toward 8 P.M., preceded by depressed spirits, dulness of the senses, and pressive headache at noon; cramps, then contracting and tearing pains in the upper and lower extremities, with a cold sensation in the hands and feet; mouth dry, great thirst, and desire for cold water; chills and shivering; sometimes very strong shuddering of the whole body; palpitation of the heart and hurried respiration; pulse weak and oppressed. These symptoms lasted from one to two hours, varied much in intensity, and were followed by a sensation of dry heat, and then of profuse perspiration, full and quick pulse, with animated red face; cold and pale in the apyrexia; thirst and desire for warm drinks.

2. At 3 o'clock, P.M., shuddering all over the body, with malaise and desire to lie down; the shuddering is renewed by motion; hands, feet, and nose are cold; flying heat in the face several times; lastly, toward 6 o'clock in the morning, constant heat in the face, which looks animated, with smarting in the eyes, especially when closing them; lips dry, with desire to moisten them often; headache, especially in the bottom of the orbits, compelling him to close the eyes, and extending to the occiput. While this congestion of the head lasts, the shuddering continues all the time; the hands, feet, and nose remain cold; urine of a dark-red color.

3. Toward 6 o'clock in the evening (immediately after dinner) cold all over; shuddering in the back, icy coldness in the feet; the hands are burning; sensation in the eyes as if one had wept a good deal. In the evening toward half past six, half an hour after dinner, shuddering in the back and legs; unusual paleness of the hands; red face; heaviness of the head; stretching toward seven in the evening; general coldness all evening; increase of the headache in the open air (toward 9 o'clock); pressive pain over the eyes as of a band of iron tied round the parts; no thirst during the shuddering; dry heat at night. At 6.30 P.M., feverish paroxysms with itching in the eyes, which is only stopped for a moment by rubbing; laming and weary pains in the shoulders; profuse emission of watery urine. Toward 5.30 P.M., prickings in the tongue; itching of the eyes; half an hour later shiverings, with heat of the face, hands pale, feet and tip of the nose cold. Towards 6 P.M., shuddering, soon followed by a dull and heavy frontal headache, spreading to both parietal regions, with redness of the eyes, itching of the internal and external surfaces of the eyelids; icy coldness of the hands and *tip of the nose*, even in the midst of the febrile reaction (the pulse is 80), the rest of the face is red and burning; lastly, dimness of sight, dilatation of the pupils; objects look red; mouth dry, with thick, viscous saliva; constriction of the throat, which scarcely allows her to swallow the saliva; anxiety, restlessness, general malaise.

The medicine being taken by healthy provers, was generally followed by—

1st. A certain state of mental excitement, and augmentation of vital energy; florid face, and a sensation of heat throughout the body; full and strong pulse; more or less perspiration, and no thirst.

This group lasted from twenty to forty minutes in some, and disappeared after that time to return no more, without any other abnormal manifestation in their health; whilst in others the symptoms were prolonged from one to two hours, and were followed by—

2d. Depressed spirits; dulness of the senses, and torpor of the mental faculties; general debility, languor, and faintings in some. When these symptoms are followed by those of the first group,

the phenomena of both sets are often repeated, and at certain intervals of time; but neither of the two occur periodically, unless when they are together. Nor are they absolutely concomitant to pyrexia; for the paroxysms generally take place without them, as in the natural disease. It is for this reason that such phenomena were disconnected from the category of the physical group; but whenever pyrexia occurs, or follows that condition, the symptoms, after weakness of the body and mind, are as follows:

3d. Great thirst; yawning; cramps and painful feelings of contraction in the lower extremities; cold sensation in hands and feet; chills and shivering of the whole body; palpitation of the heart; pulse weak and oppressed; hurried respiration; chattering of the teeth and shaking of the whole body; scanty and highly-colored urine; slight nausea in some, with yellow color of the skin and face in others; great debility; dilated pupils and confused sight. These symptoms lasted from one to two hours, and varied much in their intensity; after which—

4th. Dry heat follows, with full and quick pulse; animated face; profuse perspiration; longing for cold in some, and for warm drinks in others; and discharge of pale urine in large quantities. These symptoms lasted from two to three hours, and were generally followed by a desire to sleep. The provers felt as if they were contused; sound sleep in some, and somewhat agitated in others during the night.

The apyrexia generally lasted from fifteen to seventeen hours, after which, and *in about the same time as the previous day*, the paroxysms were repeated as per group third, and continued almost quotidian.

CHELIDONIUM.

This plant—the Great Celandine—belongs to the family of *Papaveraceæ*, to which also belongs *Papaver* (Opium), Sanguinaria (Blood-root), Argemone, Stytophorum, and Glaucium—all members of the above family, and growing wild in the United States.

When the critics reviewed the third edition of my "New Remedies," they disputed my statement that no complete pathogenesis had ever before been published. But I was right. In the "Symp-

tomen Codex" was a brief pathogenesis which had been partially copied by Lippe; while my pathogenesis was made up from Buchman's splendid provings, found in the twenty-third volume of the "British Journal of Homœopathy," together with previous provings and clinical cases scattered through our journals. Teste's provings and observations were referred to, although I consider them of but little value.

The chemical analysis of Chelidonium is of some interest. It contains Chelidonic acid, which with Malic acid is combined with the organic bases and *lime* in the plant itself.

It contains a principle called Chelerythrin, which is also found in *Sanguinaria* and *Glaucium*.

I believe we can trace pathogenetic affinities between all the plants of this (Poppy) family, especially between the Chelidonium and Sanguinaria.

The sphere of action of Chelidonium includes the *liver*, *portal system*, lungs, and kidneys.

Voigt, in "Lehrbuch der Pharmacodynamik," 1838, gives, in the language of that day, a good idea of its action: "It causes an increased secretion from the outer skin and kidneys, especially a more active circulation of the fluids of the portal system, and in the lymphatic vessels, and the abdominal glands; and, in general, a more active metamorphosis of the vegetative organs of the abdomen."

Rademacher, a close observer, says it acts on the *internal structure of the liver*, and he believes that all its general effects are due to this specific action.

It was proven by Buchman and others, with the mother tincture in massive doses, and in the 6th dilution.

In Buchman's summing up of its physiological effects, he says: "The power of exciting the whole arterial and capillary system is possessed by *Chelid.*, in common with *Aconite*, as appears from the great similarity of the febrile symptoms, but it does not agree with the *transient* character of the action of Aconite on the vascular system. This is especially evident from its effects on the *vena porta* and its functions, inasmuch as it calls forth all the phenomena of fully developed abdominal plethora. This effect is always, for the most part, produced by *defective circulation in the*

liver, and continual catarrhal excitement of the mucous membrane of the abdominal viscera. There is no room to doubt that the attacks of palpitation, slowness of the pulse (50), the distension of the veins of the hands, the paralysis, weight, and stiffness of the limbs, and the coldness of the extremities, the œdematous swelling of the legs, dull pains in the head, vertigo, pressure in the occiput, pains in the back and sacrum; weakness, indolence, irritability, ill-humor, alternation of diarrhœa with costiveness, fits of colic, yellow-gray color of the skin, renewal of the symptoms on change of weather, etc., are to be referred to a *congestive retention of blood in the portal system*, and the hyperæmia thereby determined in the abdominal organs.

In the cutaneous system it is primarily the mucous membranes upon which this medicine acts, by exciting *catarrhal inflammation*. We have accordingly observed catarrhal inflammation of the eyes, nostrils, larynx, and bronchial tubes. Even the stomach and alimentary canal, and mucous membranes of the female sexual organs, partake of this catarrhal inflammation. It extends also to the mucous lining of the canals through which flow the gall and urine.

We find three different conditions of the secretion of bile caused by the Chelidonium.

(1.) Diminished secretion. We find, *e. g.*, light, gray, or yellowish-white stools, without deposit of biliary coloring-matter in the skin, and without separation by the urine.

(2.) Suppressed secretion, with resorption into the blood.

(3.) Absorption, without stopping its escape into the intestinal canal.

The urine in most cases was *sour* to the smell, and reddened litmus-paper like a powerful acid. In intimate connection with the increased acidity of the urine we find a diminution of the acid of the stomach.

Analogues.—Buchman says: "Its symptoms combine a great part of those of *Bryonia* and *Arsenic*. It is allied to Arnica, *Nux vomica*, Ledum, Thuja, Nitric acid, and Sulph. acid;" to which I shall add Agaricus, Æsculus, Benzoic acid, Carduus, Lycopodium, Leptandra, Mercurius, Podophyllum, Phosphorus, and Sanguinaria (Chionanthus)?

Clinical Observations.—Buchman gives a list of what might be termed pathological keynotes, for the use of Chelid., namely: Vertigo, stumbling, dizzy confusion of the head; trembling and twitching in the limbs; grayish-yellow (sallow) amber countenance; increased secretion of the meibomian glands; inflamed sebaceous glands; so-called worms in the face; heat in the face; fits of rigor in the evening; cold extremities; restless sleep before midnight; dreams about corpses and funerals; sweat in morning; being terrified out of sleep by the urinal sufferings; cessation of the sufferings after dinner; drowsiness during the day; shortness of breath and anxiety, relieved by eructation; a feeling of constriction, tension, and sensitiveness in the region of stomach and right hypochondria; dryness in the throat; nausea, and dislike for flesh-meat; bright-colored (yellow) slimy stools; sour-smelling, reddish, and turbid urine.

Buchman thinks it especially indicated in spare subjects, where there exists a disposition to abdominal plethora, cutaneous disease, catarrh, and neuralgia. He agrees with Teste, that it acts with special effect upon persons of blonde complexion. (Bry. for dark complexion.)

Chelidonium is certainly not used by homœopathists as much as its merits demand. Its pathogenesis, as recorded in the "British Journal," vol. xxiv, 1866, contains many very important symptoms, which point to very decided pathological conditions. It could be prescribed successfully (perhaps *more* successfully) in many cases where we think Nux vomica, Bryonia, Mercurius, and Iris are indicated.

In certain forms of *headache* it is indispensable. It is indicated particularly in *bilious headache*, or those which arise from a deficiency in the eliminating function of the liver. The characteristic symptoms are:

"*Tension* of the head as from a bandage close over the eyebrows, as if the head was compressed; or,

"*Weight* on the head, as if bound or compressed in a vise.

"Violent *pulsating* pains from the nape and occiput to temples and forehead (Sanguinaria also).

"Great pain in the head, *pressing from within outwards*, espe-

cially towards the forehead, as if everything was falling out (like Bryonia).

"*Pressure* and *weight* in the occiput, with painful *throbbing* there; this weight is so great that the head can hardly be lifted from the pillow (Silica, Eupat. perf., Bromides)."

The headaches are generally *increased* by fresh air (contra Puls.), by cough, blowing the nose, stooping (Bry., Ferr.); *relieved* by eating (contra *Nux*).

Concomitants.— *Vertigo*, feeling of congestion, flickering, and bright or dark spots before the eyes; white or gray coated tongue; nausea, retching and vomiting of tough mucus.

"In some *sick headaches*," or "*neuralgic headaches*," it is very useful.

In *periodic neuralgic headache* located in the region of the *eyebrow* and *temple*, especially of the *right* side, it has effected some brilliant cures. In vol. xx, "British Journal of Homœopathy," page 47, Dr. Ferivat, of Madrid, reports *five* cases of neuralgia of the eyebrow and temple (four in the *right*, one in the *left*), marked by the following symptoms:

"*Shivering*, followed by pulsating pains in the eyebrow and temple, occurring at the same hour every day (on getting out of bed at 9 A.M., 11 A.M., 3 P.M.).

"The pain, at first slight, increases gradually, until it becomes almost insupportable, driving the patient to distraction. There is a bruised sensation in the eye from the front to the back. The eye becomes red and watery, and very sensitive to the light. *Aggravated* by fresh air, moving, and holding down the head. *Ameliorated* a little by pressure. The attacks end with slight perspiration (often sour). Nux was used ineffectually, but Chelidonium in the 2d and 3d dilution, every two hours, promptly arrested the paroxysms."

I have cured several cases similar to the above, but only when the neuralgia was *non*-malarial. If it is a form of *masked ague* Chelidonium will rarely cure, but generally Gelseminum, Quinia, Cedron, or Nux will have to be used.

In *diseases of the eye* Chelidonium always had a reputation, even in the time of Dioscorides and Aristotle.

Dr. Ferivat, above quoted, says: "I have often proved its effi-

cacy in *acute inflammations of the eyes*, where they are swollen, injected, with a sensation of burning, as if from the presence of a foreign body. When there is excessive photophobia, lachrymation, abundant sebaceous secretion, agglutination of the eyelids in the morning; shiverings from time to time; pain, which generally extends, not only to the forehead, but sometimes all over the head; this pain, beginning to be felt towards 2 or 3 P.M., is at its height about 8 or 9, and prevents sleep, or even lying down, till nearly daybreak."

Amaurosis, in some of its varieties, may come under the curative sphere of this medicine; also *tinnitus aurium* and other nervous affections of the ear.

It is the value of Chelidonium as a remedy for *diseases of the liver* to which I wish particularly to call your attention.

Its action on the liver is strongly marked in all the provings. It causes pain, both acute and dull, and tenderness of that organ; pain in the right shoulder ("under the right scapula" is a key-symptom); stools either soft or bright yellow, or whitish and costive; deeply-tinged urine. In three the skin became yellow or dark, and in one regular jaundice was set up.

Rademacher, who was a kind of embryo homœopathist, declares Chelidonium to be a specific in "*affections of the internal structure of the liver*," the symptoms of which he enumerates as follows:

"The perfect form of the internal hepatic disease is distinguished by white, quite colorless fæces, as in jaundice, and by the *complete absence of all the other symptoms of jaundice.* The skin is, and continues white, and has not even a dirty appearance, and the urine is nearly straw-colored as in healthy persons." (He admits that this disease is very rare. He only saw five cases in his practice.) "The unknown organ (in this disease) whereby the bile is formed from the blood is itself diseased; no bile is present, none is therefore absorbed, none therefore deposited in the skin, or urine, consequently no jaundice."

I have never seen but one case of this peculiar disease. The patient died. Rademacher implies that he has cured cases of this nature with Chelidonium.

But Chelidonium certainly cures cases of *acute* and *chronic hepatitis, jaundice from absorption of bile, jaundice caused by*

catarrh of the biliary ducts, jaundice from gallstones, jaundice complicated with pneumonia, and many other common and anomalous hepatic disorders.

Rademacher, after using and observing the use of Chelidonium in massive doses, became afraid of it in such quantities (as did Hahnemann of other medicines), and reduced his doses to a few drops or fractions of a drop. He mentions one case of a jaundiced patient who had previously taken a thimbleful of the juice four times a day, and the disease was thereby so much aggravated that the bright yellow of the skin had turned dark yellow, and the tension of the upper abdominal region was greatly increased. Fifteen drops of the tincture, three times a day, restored him without further trouble.

In the "British Journal of Homœopathy," 1867, are recorded several cases of *biliary calculi* cured by large doses of Chelidonium. These cases were not ordinary ones, but obstinate, severe, and with dangerous symptoms. In every case the prompt curative action of the medicine was unmistakable. In my own practice, in 1869, one of the most protracted cases of gallstones on record (so far as my reading extends) came under my care. The patient was a gentleman, an old resident of Chicago. He had been jaundiced nearly two years, and during that time had suffered intolerably with "congestive chills," terrible cardialgia, periodic; intense hepatic pains, and his appearance when I first saw him was frightful. He was bronze-yellow; emaciated in the extreme; urine scanty and nearly black; stool hard and white; total inability to retain food; pulse intermittent and almost imperceptible. Like the case above alluded to, he had been drugged constantly for the two years, without the slightest benefit. I began with two drops Tincture of chelidonium every three hours, increasing it a drop each dose every day, until he took ten drops, when he was seized with intense pains in the gall-bladder, followed by the expulsion from the bowels of a stone, dumb-bell shaped, nearly an inch long and half an inch in diameter. He rapidly recovered.

Induration of the liver was cured by Dr. Benedix with the Extract of chelidonium, after the disease had lasted a year and a half, and had been (mal)treated by a host of drugs.

Dr. Neidhard considers it an excellent remedy in hepatic diseases, and has reported several cures.

You will find no better remedy, and none oftener indicated in the disorders of the liver met with in general practice. Study your cases carefully, and select the medicine with equal care, and avoid the routine treatment, so common, of giving Podophyllum or Mercurius in every case. In my opinion Chelidonium is oftener indicated than either of them.

A disorder of the secretory functions of the liver, described by Flint under the name of *Cholesteræmia*, may be successfully treated with Chelidonium. One case came under my care which closely resembled that disorder. Chelidonium 1ˣ removed the symptoms (like acute rheumatism) in a week.

Buchman says he "cured the *fatty liver* of a scrofulous girl, aged 4,—the border of the organ extended as far as the navel, with accompanying icterus,—in six weeks, by three doses of the 6th of Chelidonium."(!) It is just possible the cure was one of nature's making.

The gastro-intestinal disorders in which Chelidonium may be used to advantage are comprised under two classes, namely, *intestinal catarrh* and *bilious diarrhœa*. Buchman gives several cases illustrative of its action in the former disorder. It was not usually attended by pains in the abdomen; it occurred at night; was yellow-slimy or whitish-yellow; the face was pale or sallow; and there was much debility.

The bilious diarrhœa was attended with much debility, but not much pain.

My studies and experience with Chelidonium convince me that the action of Chelidonium on the liver and intestinal tract is as follows:

Primary.—Irritation of the secretory function of the liver, with yellow fecal discharge, debility, etc., followed by yellow mucous diarrhœa, showing irritation of the intestinal mucous membrane. (6th.)

Secondary.—Arrest of secretory function from overstimulation (reaction), or obstruction of hepatic ducts, with white stools, or brown, watery—with jaundice; urine brown or yellow, and sour (loaded with bile). (3d to θ.)

It is important to understand this dual action, for thereupon

hinges the selection of the proper dose, which I have designated above.

Bell, in his admirable monograph on diarrhœa, says "the Chelidonium diarrhœa is aggravated at night, *ameliorated* from (colic) wine, and attended by rumbling in the abdomen, both before, during, and after stool, with slimy, white-coated tongue, disgusting or bitter taste, desire for wine, milk, which agrees; for hot drinks, which agree; aversion to cheese and boiled meat." I am of the opinion that the *pain* is not sufficiently mentioned, for it is not possible for a bilious diarrhœa or intestinal catarrh to be attended with only *rumbling*, and no *pain*.

In the *summer diarrhœa of children*, I have found it at certain seasons one of the best of remedies. It is especially indicated in the diarrhœa which attends infantile pneumonia or capillary bronchitis. Sanguinaria is also indicated here, although it has been but little used.

Buchman was quite enthusiastic that Chelidonuim would prove a valuable renal remedy. He based his hopes on one proving,—his wife's. Her symptoms were "pressive pains in renal region, not confined to the kidneys, but extending to the ureters and bladder—accompanied by turbid urine." He says he discovered "renal cylinders" in the urine, from which he divines a condition of "croupose inflammation, and consequent degeneration of the glandular epithelium." "Just as in this proving, so in morbus Brightii, we found increased uric acid, diminished chloride of sodium, and dissolved hæmatin in pale-yellow, slightly turbid urine, which, when albumen is abundant, is colored reddish." His wife had, also, other symptoms of Bright's disease: "Œdematous swelling of the extremeties, neuralgia in the region of the trigeminus and supraorbitalis."

No subsequent experience has been published in relation to Chelidonium in diseases of the kidneys. Buchman, however, gives one case with the following symptoms, which he removed with the 6th: "Pain in the region of the kidneys, and in the head, with sparks before the eyes; urine reddish, turbid, containing fibrin, flakes, and sand."

I doubt if Chelidonium will prove a very valuable renal remedy. It certainly needs further proving in that direction. I am of the

opinion that its renal symptoms mostly depend on the hepatic derangement it causes.

Chelidonium is recommended by both Buchman and Teste in *laryngitis, bronchitis, pneumonia, influenza, whooping-cough, asthma, spasm of the glottis, endocarditis, pericarditis, pleurisy, typhoid fever, hæmorrhoids, worms, chorea, acute rheumatism, measles, erysipelas of the face, acne, eczema rubra, ulcers*, and, finally, *injuries* (instead of Arnica).

I do not propose to go into detail and examine the homœopathicity of the drug in these diseases. If you would investigate the extensive history of this medicine, I refer you to vols. xxiv and xxv of the "British Journal."

I will only say that the therapeutics of Chelidonium has been almost too elaborately worked up. It has a pathological keynote, which should be the guide, next to the totality of the symptoms, for its selection. That keynote I believe to be *derangement of the hepatic system.*

I do not believe that Chelidonium is capable of causing idiopathically all of the diseases mentioned above; but they may appear in some forms during the provings, if heroic enough, as *concomitants of the central hepatic irritation.* With this explanation, you will have no difficulty in adapting it to any of the diseases for which it is recommended.

My experience with it in *pneumonia* is, that when the liver is implicated, and the right lung is affected, it will prove useful, if a yellow, slimy diarrhœa is found.

In *cardiac affections*, consequent on hepatic derangements, it is a good remedy (on the contrary, if the hepatic trouble is caused by cardiac disorder, Digitalis).

I have found it useful in hæmorrhoids, in some phases of typhoid fever, and in *influenza.*

I have not used it enough in whooping-cough to give any favorable opinion of its virtues. It is highly praised by some.

Dr. Clifton, of England, writing of his experience in *dyspepsia*, speaks highly of Chelidonium. He recommends it for the following conditions:

1. Tongue dry and white.
2. Appetite. (Desires and dislikes.)

a. Desire for milk which produces comfort, though it formerly caused flatulence.

b. Great longing for wine, which does not as before produce congestion and heat in the head.

c. Prefers hot things, dislikes those which are cold.

d. Dislikes boiled flesh.

e. Must eat more breakfast than usual, in order not to get faint before dinner.

f. Disgusting taste; food tastes naturally.

3. Eructations relieve nausea.

4. Stomach, aching and gnawing pain in; constrictive feeling over, aggravated by pressure, but relieved by eating or during the early hours of digestion.

5. Sensation of constriction and sensitiveness in the scrobiculus cordis and right hypochondrium.

1. The first of these symptoms or "characteristics" relates to the tongue. All that is said of it is, that "it is dry and white." The description I would give of the Chelidonium tongue is, that it is moderately dry or moist, of a good natural color, but slightly coated white, and sometimes streaky, the shape of it being narrow and pointed. It has been, in cases of dyspepsia, where there are other symptoms indicating Chelidonium, that I have found the tongue to answer to this description. Where the liver is more affected, there is often a yellowish fur.

2. Appetite, desires, dislikes to food. *a.* "Desire for milk, which does not cause flatulence as it used to do, but produces comfort." In several cases of dyspepsia, where Chelidonium has been otherwise indicated, this symptom has been very marked.

In all cases of dyspepsia where the appearance of the tongue answers to that indicating Chelidonium, I generally find that when such persons are in health milk gives rise to flatulence.

One such case was a man, 64 years of age, suffering from hypertrophy of the heart, with gastric dyspepsia, giving rise to loud, tasteless, or bitter eructations. He had suffered from gallstones, and I had successfully treated him with Berberis. To relieve his dyspepsia, I unavailingly gave him Carbo v., Argentum nit., and Bismuth, as well as other medicines; Chelidonium greatly relieved the dyspepsia, though it failed to check the eructations.

I kept him on a milk diet (not skim milk) for a month with benefit. Previously he had had the desire for milk, but was unable to digest it.

Another patient, who suffered frightfully from spasmodic pains in the stomach, followed by bitter and bilious vomitings, had noticed that when well she could not take milk, but was able to do so when ill, provided it was warm. She obtained rapid relief from Chelidonium (1st dec.) in two attacks, and the dyspeptic symptoms which ordinarily preceded and followed an attack were quite cured by the same remedy.

b. "Great longing for wine, which does not cause congestion or heat in the head as before." I have occasionally noticed these symptoms in cases of dyspepsia indicating Chelidonium, though not to so marked an extent as the incapacity to digest milk just referred to. In one case—to be noticed presently—there was a longing for beer, which I did not gratify, as it manifestly disagreed with the patient, but I permitted him to take wine with advantage.

c. "Prefers hot things." This I have often noticed in dyspeptics cured by Chelidonium.

d. The dislike to boiled flesh, said to be a characteristic of the Chelidonium dyspepsia, I have not noticed.

e. The feeling a necessity to eat a larger breakfast than usual in order to prevent faintness before the next meal, I have seen something like in the desire for food to prevent stomach pains.

3. Eructation relieving nausea I have occasionally observed to occur in dyspeptics relieved by Chelidonium.

4. *Stomach.*—"Aching-gnawing pain in the stomach, with a sense of constriction, aggravated by pressure, but relieved by eating or during the early hours of digestion," is, I believe, a very marked characteristic of Chelidonium dyspepsia.

5. "Sensation of constriction and sensitiveness in the scrobiculus cordis and right hypochondrium," are often associated with the foregoing; or rather, whilst in the former, the aching gnawing is relieved, during the early hours of digestion, this is often aggravated slightly, and in my experience is more frequently indicative of Nux vomica, if other symptoms correspond, than of Chelidonium.

As an illustration of symptoms 4 and 5, I will adduce the following case:

A gentleman, aged fifty-two, of spare habit, accustomed to a moderate amount of exercise by day, but poring over his books and plans till one or two in the morning, had frequently suffered from indigestion. On one occasion he had jaundice, and once had had intermittent fever. When he consulted me he had been suffering for two months, and had taken from his own medicine case Bryonia, Nux, Chamomilla, Sulphur, etc., without benefit. He complained of giddiness in the morning, and of headache on waking. His sleep was unrefreshing from vivid dreams of business matters. He disliked his usual mental studies. The appetite was diminished, but when he had eaten a little he could eat more, because he then felt better. An aching pain in the stomach was nearly constant, but was better after food. Constrictive feeling across the stomach from right to left hypochondrium, so much so as to oblige him to loosen his clothes two hours after a meal. Slight eructations; bad taste in mouth; desire for beer, which, though he relished it, caused heartburn and headache; his stools were pappy and light-colored; urine normal; his tongue was only slightly coated white, and rather moist, thin, and narrow in shape, like that in persons of a nervous temperament, or where there is nervous irritability; his face was pale, and of a yellowish tint. For a month I gave him Nux, China, and Ignatia of various dilutions, but without benefit. I therefore turned to a record I keep of characteristics, where, under "Stomach and Appetite," I found No. 4 characteristic of Chelidonium. I next consulted the Repertory of the Hahnemann Publishing Society (a work it is disgraceful to us as a body not to have completed long since). In this I found that, under Petroleum and Nitric acid, there is "aching pain when fasting, relieved by food;" under Pulsatilla, "gnawing pain when fasting, relieved by food;" under Nux vomica, "contusive pain when fasting, relieved by food." None of these corresponded so well, especially in the mental sphere, in the totality of their symptoms to the case under consideration, as did Chelidonium. One drop of Chelidonium, 3d dilution, taken four times a day, gave relief in three days, and in a fortnight my pa-

tient was well. He has had a similar attack since, when a few doses of the same medicine soon cured him.

Such are the chief characteristics of the Chelidonium dyspepsia I have been able to verify clinically. I have in addition seen one case of mental distress cured by this medicine. Without much dyspepsia, there was a dry, white, narrow, and pointed tongue; with a desire for wine and but little appetite. The mental symptoms were restlessness and uneasiness of conscience. She felt that she had committed the unpardonable sin, and that she would be eternally lost—a condition very similar to one described by Dr. Buchman in his proving of Chelidonium.—"Hom. Review."

CHELONE GLABRA.

The Chelone is one of those bitter indigenous plants which has always had a popular reputation as a tonic, or strength-restorer. The same may be said of Gentian, Frazera, the foreign Columbo, and others.

But the Chelone seems to possess some specific powers aside from its general action. No provings have been made, but the clinical experience of a few homœopathists, and my own, show that it must affect the liver.

It has been found very beneficial in *weak digestion*, especially when due to want of tone in the stomach.

Jaundice, with loss of appetite, disgust for food, constipation and debility, has been removed promptly by drop doses of the tincture.

Dr. Ball, of Marshall, Mich., has had much experience with Chelone in *intermittent fever after abuse of Quinine*. In such cases the Chelone cures, not by possessing any anti-malarial virtue like Quinine, but by its power of removing the *Quinine cachexia*. That troublesome condition, which follows severe attacks of malarial fever, known as "dumb ague," consisting of ill-defined paroxysms of aching, with fever and distress, may be removed by this medicine if its use is patiently continued a few weeks.

Dr. E. C. Price, of Baltimore, verifies Dr. Ball's experience. He gave it to a man broken down with ague, and who, notwithstanding the use of Quinine, Iron, and Strychnia, became so

weak as to be unable to sit up. "The tincture of Chelone, five drops three times a day, brought him right up, and he has remained well ever since."

CHLORAL.

The Hydrate of Chloral was discovered by M. Liebreich, and introduced by him as a therapeutic agent, before the Medical Society of Berlin, in June, 1869. It was a white solid, made up of needle-form crystals having the appearance of snow. It has an odor similar to ripe muskmelons. On exposure to the air it rapidly deliquesces, and after a time wholly disappears. It is soluble in water, alcohol, and ether.

The lower animals are readily affected by very small doses, two to five grains causing profound sleep. It is certain and rapid in its action. For an adult man twenty grains is the average dose. This generally causes the semblance of a normal, profound slumber, commencing in fifteen to twenty minutes after the drug is taken into the stomach, and lasting from six to ten hours. Certain persons, however, are so constituted that they require double this quantity to produce the same degree of somnolence. As a rule, the quantity may be safely graduated for a single soporific (sleep-causing) dose. *Two grains can be given for each year of age until the patient is twenty.* This dose may be repeated in an hour (or even thirty minutes if intense pain is present). If you give the Chloral hydrate to cause sleep and alleviate pain, you must administer the definite quantity known to cause the desired result. You can no more produce anæsthesia with the attenuations than you can with the attenuations of Chloroform or Ether. It is only for symptoms and conditions simulating its primary effects, that you can give attenuated doses; nor will it bear much attenuation, all theorists to the contrary notwithstanding.

Under a heavy dose the breathing is imperceptible; after a moderate one the breathing is soft and gentle. There is no sensibility during this sleep, not even upon the external applications of stimulants. They sleep on, while all the functions of life are apparently at rest, except one, the circulation. On a microscopic examination of the web of a frog's foot, while under Chloral, the

circulation is found most perfect, confirming the theory of Liebreich, that the heart is the last to die.

One prominent and persistent effect is the decrease of animal temperature with contracted pupils. No excitement *precedes* the sleep. · Patients can be aroused at any time to full consciousness, the natural functions are performed, there is no disturbance of the secretions, and waking is not attended by disagreeable symptoms.

In fatal cases the following symptoms occur: Stertorous respiration; eyes set and glassy, pupils contracted and insensible to light; conjunctiva congested; motion of the heart quite rapid and so feeble as to be scarcely felt; blood settles under the finger nails; purple spots are on the side on which they lie; extremities cold, and frothy mucus flows from the mouth; insensibility of the skin, with occasional moments of hyperæsthesia.

The functions are destroyed in the following order: (1) The cerebral; (2) the involuntary muscles; (3) the respiratory; lastly, the heart.

It paralyzes the ganglionic cells of (1) the brain, (2) the spinal cord, (3) and last, the heart.

Its mode of action is quite analogous to Chloroform, but *large* doses should be avoided when the heart is weakened.

Its therapeutical uses in homœopathic practice are similar, in one respect, to its use by the opposite school, viz., for the *necessary* alleviation of pain and the production of sleep. I do not hesitate to resort to it, after a fair trial of our most approved homœopathic remedies; nor should any of you, after you have decided in your best judgment that your patient will be in better condition from its use than without it.

It is to the public one of the most fascinating of narcotics, if its taste is tolerated; but its habitual use is attended by all the evils which follow the *abuse* of such agents. Attempts to break off the habit have resulted in a condition similar to delirium tremens, and other depressed and irritable mental states.

Its immediate effects on the *mental sphere* are always calming, soothing, and quieting. Its remote (secondary) effects, depressing and irritating.

It is, therefore, secondarily homœopathic to many forms of *insanity, idiocy, and dementia.*

The records of insane asylums give the following pretty uniform results, the average dose being from 20 to 30 grs.: "When patients are destructive and violent, it acts as an excellent hypnotic by night, and a soothing agent by day; they become free from destructive habits, and gain in weight and strength; the action of the bowels and bladder improves; the appetite is increased; it relieves abnormal sensations and hallucinations; it checks the desire for self-injury; and melancholic patients become more cheerful."

It has been observed that "the greater the disorganization of the brain and cord, the sooner does the system come under its action."

I have used it successfully in many cases of *delirium tremens* and *puerperal mania*, when the symptoms were like those I have just described.

The pathological condition which it induces in the brain in fatal cases is said to be *anæmia*. This I suppose to be the *primary, direct* result of a single fatal dose.

But cases are on record which go to show that an opposite condition results from longer use—of massive doses ending in death. In other words, *secondary effects supervene*. Thus Hammond relates a fatal case, where he gave it for a disease of the brain, and found congestion of the *brain* post-mortem. In other cases, the brain, cerebellum, and their membranes, showed an increased vascularity; but these I believe were secondary effects.

Its purely homœopathic applications in *brain disorders* are as follows:

In *cerebral anæmia*, suddenly appearing, simulating the usual effects of a dangerous single dose, you may prescribe it in the 3^x or 6^x dilution. In such cases it is analogous to the *Bromides* and *Conium*.

In *cerebral congestion*, occurring as a reaction from previous anæmia, the Chloral is one of the best remedies you can use, if you select it judiciously. It here rivals the Bromides.

This condition of the brain is that which is found in patients whose insanity takes the form I mentioned at the beginning of this lecture.

There is sometimes excruciating pain in the occiput and tem-

ples; great heaviness of the head, and a feeling of compression of the head, as if in a vice; also aching and redness of the eyes, illusions of vision, and photophobia.

I have cured *congestion of the brain in children after cholera infantum*, with the 1^{x} dilution.

It is useful for the *night terrors* of children when arising from worms, teething, and the result of *cerebral irritation* after colliquative discharges. Here it rivals Cuprum aceticum and the bromides, either of which are superior to Belladonna, which is so absurdly used in a routine way.

I can hardly give you the differential diagnosis between the Chloral and the Bromides in such cases; the line of distinction is very intangible. You will have to learn it by experience, or rely upon your intuitions, or wait until we have complete provings of these important drugs.

I believe it will prove useful in some cases of *cerebro-spinal congestion*, but doubt its usefulness after inflammation has taken place. The pains in the occiput and head seem to indicate its relation to this disease.

When inhaled it causes intense irritation of the nasal and other surfaces of the respiratory mucous membrane. You may find it useful in cases of *hay fever* (catarrhus æstivus) if inhaled at the very outset of the malady, in a very dilute form. In my own case 10 grains taken at the outset of an *influenza* always arrests it.

Its effects on the eye and sense of vision are unique and peculiar. (You will find many hay-fever symptoms among its eye symptoms.)

It causes aching in the eyeballs, which feel too large. (Spig.) The lids feel so heavy he can hardly lift them. (Gels.) Intense itching of the inner canthi and edges of the lids; the lids are puffy and swollen; red, injected, and bloodshot eyes; burning in the eye and eyelids; profuse irritating lachrymation.

You will find some interesting contributions to the therapeutics of Chloral in the "British Journal," for July, 1874, by Dr. D. Dyce Brown. Taking the above symptoms of the eye as the indications, he treated *twelve* cases of *conjunctivitis* with Chloral, and with uniform success. His doses were—"one grain of the pure salt, in water, three times a day, for adults, and fractional doses

for children." In two cases, in my own practice, its curative effects were simply magical.

In addition to the symptoms already given, his cases presented others, namely, small *ulcers on the cornea; phlyctænæ; severe circumorbital pain; chemosis; loss of appetite,* and *sleeplessness.*

It ought to be useful in abnormal conditions of the sense of vision, such as *asthenopia, color-blindness, ocular hyperœsthesia, photophobia,* and perhaps, *threatened paralysis of the optic nerve.* Many of its eye-symptoms resemble those of Gelseminum, Coca, Calabar, and Cannabis indica.

Spasm of the glottis is imitated by the symptoms of the tongue and throat (primary).

I have made some very gratifying cures of *traumatic odontalgia* by means of Chloral, several of which have been reported in our journals. If the toothache is from the pressure of a filling, give the usual anodyne dose internally; if from substances which have gotten into a cavity, clean it out, and fill it with the crude salt, or cotton saturated with the mother tincture (one grain to each drop of water or alcohol).

It may be useful in the attenuations, in the severe *flushings* which occur at the critical age, for it has caused a "dark scarlet flushing and heat of the head and face, from roots of the hair to ramus of the lower jaw, including the eyes; it was persistent under pressure; was blotchy in places, and extended to the neck and chest. There was excited circulation and slight contraction of the pupils."

Similar paroxysms occur premonitory to, and during tubercular meningitis, and I observed them last summer, after attacks of cholera infantum. In the latter it came on in the evening, and prevented sleep from the heat and itching.

I have used it in a few instances in the severe *pains, vomiting and retching from passage of biliary or renal calculi;* but you must avoid its use in large doses in *jaundice from arrest of secretion,* for it has caused "*jaundice, with coma and stupefaction,*" and aggravated many cases.

It has also caused *atrophy of the liver,* but these facts need not deter you from trying it in just such cases, if you prescribe the

attenuations (1^x to 3^x). The law of *Similia* ought to hold good in relation to Chloral as well as to Mercury.

Chloral does not cause diarrhœa, nor do the Bromides, yet in those cases where the diarrhœa is the result of morbid nervous depression with irritation, it will remove the cause, thus indirectly curing that symptom.

For example, in cases of cholera infantum, where there is intense nervous erethism, severe pain, and threatening spasms, I have not hesitated to give Chloral in doses of 1 to 5 grains.

The Bromides and some other remedies may be equally well indicated by the symptoms; but no other drug acts as quickly, and in some cases a few minutes lost is fatal to the patient.

It has been suggested in *cholera*. It causes all the symptoms of cholera, except the purging and vomiting. But in some cases of cholera (cholera sicca) no discharges occur. The patient is stricken down suddenly, and dies from syncope induced by cerebral and cardiac paralysis. Chloral is homœopathic to such cases.

No special observations have been made as to its pathogenetic action on the kidneys and bladder.

It has been used with good results in *incontinence of urine*. Dr. Leonards considers it the only reliable remedy to remove the *spasmodic* action of the detrusor vesicæ, which overbalances the contraction of the sphincter. He gives children from 6 to 10 grains dissolved in water, just before going to bed; allows only small quantities of fluids at supper, which should be taken several hours before going to bed. He adds: "We must, in enuresis nocturna, strictly differentiate between spasm and atony of the vesical muscles, as in the latter case Iron and Quinine are indicated." (Ferr. mur., Nux.)

It appears to have some diuretic action, either direct or indirect. In the case of anasarca where it was given by Dr. Swan, in 5, 10, and finally in 15 grains, every 2 or 3 hours, it alleviated the terrible sufferings; and the action of the kidneys, which had been almost suspended for days, became active again under its use.

Chloral-eaters are said to lose their sexual desires and become impotent. I have not observed any such phenomena.

I have used it in many cases of painful and persistent *chordee*

during gonorrhœa. Ten or fifteen grains taken at bedtime, not only causes sleep, but actually prevents the painful erections.

In the diseases peculiar to women, Chloral is a useful palliative.

In *dysmenorrhœa* of unusual severity, it will give relief when specific remedies fail. It may require 5, 10, or 15 grains every hour, according to the intensity of the symptoms and the idiosyncrasy of the patient.

In a paper read before the Edinburgh Obstetrical Society, E. Lambert claimed that while Chloral could not supplant Chloroform, it can be used to advantage in the *first stage of labor*. He also claimed that it could be given "under favorable circumstances" all through labor, and that the woman could go through from commencement to termination without consciousness. I suppose he means by "favorable circumstances," that the patient has no *tendency to hæmorrhage*, for if such exists, Chloral is not considered a safe remedy.

American accoucheurs rarely give Chloroform during labor, and then for a few moments only at the very termination. If the patient requires it for an hour, or for hours, Ether is the best and safest anæsthetic. I should hesitate to administer Chloral in large doses to a person with weak heart, or in whom I suspected a tendency to hæmorrhage. I have, however, used Chloral in several cases of labor, when the intense nervous irritability led me to fear convulsions, and when Veratrum viride was not admissible. In all these cases it had the happiest effects. I agree with Dr. Lambert, that "it does not suspend, but rather promotes uterine contraction, by suspending all reflex actions which tend to counteract the excitability of the centres of organic motion." The dose of Chloral required will depend on many circumstances. I have given 10 to 15 grains every hour. Lambert advises gr. xv every quarter of an hour until the desired results are produced.

I have alluded to its power of preventing *puerperal convulsions*. I believe it has such power. The late Dr. F. A. Lord reported two cases where 20 grains arrested such convulsions promptly.

It causes *pulmonary œdema*, yet it has been found a valuable palliative in that condition, as well as in emphysema. In very

small doses it ought to cure the former, if the general state of the patient is not too much depressed.

It weakens the heart; it paralyzes the ganglionic life of that organ, yet true to the law of *Similia*, it has been found to restore force and motion to the heart when life was rapidly ebbing away.

In Drs. Swan and Helmuth's case there was organic disease of the heart. The Chloral almost restored normal action to the seriously disorganized organ.

The symptoms it causes are: "Great dyspnœa, a sense of suffocation, oppression at the base of the chest, in front; tendency to fainting, intolerable sinking at the stomach, livid lips, cold extremities, respirations as low as four per minute, pulse imperceptible."

I have given it in the threatened *paralysis of the heart* during pericarditis. The dyspnœa and distress were fearful, yet 5 grains every 15 minutes restored the action of the heart, and the patient made a good recovery.

The *pulse* of Chloral is frequent, weak, irregular, in both force and rhythm, frequently intermittent; but the *heart* at the same time acts regularly, but with increased frequency and diminished force.

I predict that in *cardiac neuroses* Chloral in properly graduated doses will prove one of our best remedies, not only palliative, but curative.

I am not as sanguine as Dr. Swan, who claims to have got heart-symptoms by taking the 200th dil., and that the 40th will cure cardiac neuroses. Such assumptions need be put to the test of positive experience before we accept them.

When brought in contact with *blood* it stops the process of coagulation. It destroys the blood-corpuscles, and produces a general destruction of that fluid.

Its continued use internally has caused *purpura hæmorrhagica*, preceded by a "bright red blush, erythematous in aspect, but permanent under pressure," followed in two days by "deep red spots, mixed with mottled livid patches." The buccal mucous membrane becomes red, raw, ulcerated, and blistered, breath fetid, pulse 120 and feeble. A desquamation ensued, but with bed-sores

in some places. In other cases it caused petechiæ, vibices, and ecchymoses.

If this action of Chloral is *dynamic*, it may prove a homœopathic remedy in *purpura* and *scurvy*. If *chemical*, we need not expect curative effects from it.

Reference has been made to the peculiar flushings of the face and neck caused by Chloral. It causes another species of eruption, namely, of *blotches* of different shapes, raised above the surface, and of a deep-red color. These blotches nearly coalesced, nearly resembling measles. This was attended with high fever, thirst, coated tongue, loss of appetite, and intense irritation of the skin, preventing sleep at night. It has caused an eruption on the arms and legs exactly like nettlerash, in large raised wheals, with intense irritative itching. Another case so imitated *scarlet fever* that the person was supposed to be laboring under that disease. In this same case, "A number of large, pale elevations, or wheals, showed themselves on the legs, shoulders, and waist, while similar ones could be produced on other parts by scratching. At the same time, burning and stinging sensations, and a feeling of tightness and hardness over the whole surface, with lassitude, headache, sharp pain in the eyeballs, wheezing respiration, etc."

It is not improbable to suppose that it affects the mucous membrane in a similar manner.

These symptoms make Chloral an analogue of Apis, and this analogy may be closer than we now imagine; it is also a congener of Urtica urens, Copaiva, and Arsenic.

Dr. Dyce Brown, believing that Chloral might be used with advantage, tried it in nine cases of *urticaria*, and with complete success. He gave from one to one-quarter grain every three hours. In another six cases the patients did not return and report, and he thinks they, too, were cured.

In one case of *pruritus vulva* it relieved after Collinsonia failed.

It will be a lucky thing for us if we have found a specific for *nettlerash*, for it has been a difficult matter to affiliate a remedy. Some of the freaks of nettlerash resemble Chloral effects, namely, the sudden stupefaction, asthma, and cramp of internal organs, not to mention vomiting and purging, which latter is supposed to be due to its retrocession upon mucous surfaces. I have only had

the opportunity to try it in a few cases, one of which was quite satisfactory. A child, a year old, had suffered from severe summer complaint for several weeks, had become pale and weak, when a new symptom set in which deprived it of all rest and sleep—an *urticarious* eruption, red, blotchy, and itching, on the face, neck, and shoulders, worse in the evening. Apis, Arsenicum, and Croton were tried unsuccessfully. Chloral, 5 grains in half a glass of water, a spoonful every hour, removed the trouble in two days.

There is a kind of *nervous itching*, a species of *pruritus*, affecting the whole body, coming on after undressing, especially at night; there is no visible eruption until the skin is scratched, and sometimes not then. Ignatia is recommended, and will sometimes relieve, but Chloral may prove a better remedy.

In certain *spasmodic diseases* Chloral has been of infinite service to the physicians and surgeons of all schools.

I have already alluded to its use in puerperal convulsions. In *tetanus* it has made some very brilliant cures. It is indicated for *tetanic spasms* from *Strychnia poisoning; trismus* from *traumatic* causes; from *cerebro-spinal meningitis;* and also in *infantile tetanus.*

You must not expect to cure such a terrible disease as *tetanus* with any but massive doses. You might as well attempt to propel a five-pound shot with ten grains of gunpowder.

The dose in cases of tetanus in strong adults ranges from 10 grains to 3 drachms, repeated every one, two, or three hours, as the case demands. One patient, with traumatic tetanus, reported by Dr. Vernuil, took the enormous quantity of 200 grams (3000 grains) in twenty-eight days, and made a good recovery. Dr. Æschenthal cured a case of *trismus* in a child seven days old. It had twenty-seven spasms, and took in all 25 grains.

In *trismus* and *tetanic convulsions* of very young infants, or in teething children, I have given it in many cases. I prefer it to any other remedy because it acts so quickly (in ten to fifteen minutes), as in some cases a few moments lost is a life lost.

In tetanus it rivals Calabar, Atropia, Gelseminum, Bromide of potassa, and Curare, all of which cure by virtue of their secondary action. I do not assert that remedies primarily indicated in tetanus, like Nux vomica, Strychnia, and Ignatia, will not cure,

for I know that cases have been cured by the latter class. I would advise you to use the latter in cases of less intensity, or when you think you have time to test their power. I need not inform you that primarily indicated remedies must be used in minute doses (from the 6th to the 30th attenuations).

Chorea in its severest forms has been treated by Chloral with success.

A severe case, in which the little child could neither lie nor stand, the head, limbs, and body being in constant motion, and each muscle apparently partaking of irregular action. She could not utter a syllable, and swallowed with difficulty. She would wake from disturbed rest, cry out, and scream until perfectly exhausted and in danger of general convulsions. She became anæmic and emaciated. Two grains of chloral put her to sleep. Its use was continued every night for a week. After that time improvement was so rapid that it was abandoned.

M. Bouchet says: "Chloral is a most prompt and efficacious remedy in those cases of intense chorea where the constancy and severity of the spasmodic movements threaten the life of the patient."

Dr. Russell relates a case of severe chorea during the fifth month of pregnancy cured by Chloral.

Dr. Strange cured an obstinate and long-continued case of chorea in nine days, with eight grains repeated every three hours.

No remedy, in my experience, will so quickly and permanently remove the uncontrollable nervous agitation of *hysteria*. A dose of 15 or 20 grains will quiet a fit of hysterics so suddenly as to astonish the patient and her friends. It is quite homœopathic to a hysterico-cataleptic state, when the patient is conscious of all that transpires but cannot rouse herself.

A word as to the proper treatment of a case of Chloral poisoning. Nux vomica 1^{x}, Strychnia 3^{x}, and Atropia 2^{x} are the best antidotes, aided by Digitalis when the heart is failing; electricity applied to the spinal cord; and Ammonia by inhalation and internally. The *sleep* caused by Chloral is not always calm. Some patients seem to suffer from and complain of *horrible dreams, frightful visions; they scream and cry out, sit up in bed, and cannot be quieted.* An adult who was taking it for rheumatism, after

sleeping a few hours, would jump out of bed trembling with fear, bathed in a cold, clammy sweat, and scream frightfully as if in mortal terror. Here we have a good picture of those conditions known as *nightmare, night-terrors*, and similar morbid conditions occurring premonitory of or during meningitis.

I usually give in such cases very small doses, $\frac{1}{10}$th to 1 or 2 grains, according to age, and have been very successful in removing these abnormal symptoms.

In the 6th or 30th it may prove curative in "comatose conditions lasting for days, ending in cerebral congestion."

The pleasantest vehicle in which to administer this drug, when given in appreciable doses, is the *Syrup of tolu*, to which you can add from 1 to 20 grains to each teaspoonful.

The dilutions from the mother tincture (1 grain to 1 drop) are made with water, alcohol, or syrup.

On the Use of Chloral-hydrate Enemata.—Dr. Starcke, of Berlin, has a paper on the employment of Chloral-hydrate enemata in the "Berliner Klinische Wochenschrift" (August 19th). He observes that there are great prejudices, especially in England, against the continued use of Chloral, occasioned, probably, by the not unfrequent misadventures occurring in connection with its use in habitual drunkards. Last year Dr. Starcke himself fell ill of a chronic gastric catarrh, with great acidity of the contents of the stomach, and considerable emaciation and prostration. The principal and most distressing symptom, however, was persistent insomnia, only half an hour to an hour's sleep being obtained at night. At the suggestion of his colleagues Dr. Starcke resorted to the use of Chloral, but the irritable state of the stomach forbade its use by the mouth, and hence he determined to take it *per rectum*. An aqueous five per cent. solution of Chloral was warmed to about 95° Fahr., of which he first injected 10 grams, and after a quarter of an hour a further quantity of 10 grams, so that in all 1 gram (15½ grains) of Chloral were thus taken. This was in a few minutes followed by a feeling of warmth, comfort, and repose, and lastly by sound sleep, which lasted uninterruptedly for five hours. In this manner Dr. Starcke continued the injection of Chloral for five months, taking in all 120 grams of the drug. Decided convalescence set in after almost the very first dose, which was followed every morning by a sense of vigor and a desire for food, without any headache or other discomfort. Nor did the efficacy of the dose of Chloral diminish, and latterly even half the quantity, *i. e.*, .5 gram was sufficient. Frequently the attempt was made to obtain sleep without resorting to Chloral, but in vain, until within the last month, when Dr. Starcke found he could discontinue it altogether. This employment of Chloral *per rectum* has decided advantages in cases of gastric irritability. Dr. Starcke tried twice to take it by the mouth, and each time it was, after a lapse of a few minutes, completely rejected, and no sleep ensued. The absence of all unpleasant results when administered by the rectum is doubtless due to its undergoing no decomposition, as is generally the case when it comes into

contact with the contents of the stomach. Of course, the drug should be absolutely pure. The sensation of burning and tenesmus which at first follows an injection may be materially obviated by well oiling the nozzle of the syringe. And since the site of the tenesmus is chiefly in the region of the sphincter, contact of the chloral solution with this part of the gut should be avoided by passing the injection pipe as high up as possible. And if the injection is made by one's self, the position on knees and elbows will be found the most convenient. It is also of consequence that the solution should be complete, and that it should be warmed to the temperature of the body; also that the dose required is a moderate and even small one, as compared with that usually given by the mouth. Dr. Starcke has subsequently used Chloral in the same way in various cases and with the same uniformly safe and favorable results. It seems specially applicable in the case of aged people, and in no case need the dose exceed one gram (15½ grains).—"London Medical Record," October 15th.

Enemata of Chloral in Sick Headache.—Dr. J. Seure ("Bull. Gén. de Thérap." 1878, p. 365) recommends this treatment very highly. He says that a patient of his, a lady, who is subject to severe attacks of migraine after shopping, etc., is accustomed, on her return home, to take an enema consisting of a glass of warm water, with a tablespoonful of the following mixture: ℞. Chloral, gr. xlv; Aq. destillat., ʒx.—M. She then reclines upon a sofa, with closed eyes. Within a few *seconds* she begins to taste the Chloral in her mouth, and at the same time she experiences a sensation of numbness. Little by little the headache disappears, nausea is allayed, and half an hour later nothing remains but a slight discomfort in the head, with a little torpor.

Within an hour and a half this lady finds herself able to sit down to dinner, and by the time the meal is over she has forgotten all about her headache and is able to entertain visitors during the evening. In this case twenty grains of the Chloral are enough, but in the case of men thirty to forty grains are required. Dr. Seure has noticed that the relief gained is more prompt if a tablespoonful of brandy or whiskey is added to the enema. The enema has one disadvantage, that is, the slight burning pain which it causes in the rectum. This may be avoided by the use of a glass of warm milk instead of water, or better by beating up the yolk of an egg in the water. In the case of individuals who retain enemata only with difficulty, a smaller amount may be injected, and a drop or two of Laudanum may be added. Dr. Seure regards this treatment as almost infallible for the arrest of an attack of sick headache, and as decidedly preferable to the administration of remedies by the mouth. It has the advantage of not disturbing the stomach. Chloral also acts very promptly, its absorption by the rectum being almost instantaneous, as is proved by the effects on the general system, and also by the exhalation of Chloroform by the lungs within a few seconds after the enema has been taken.—"Philadelphia Medical Times."

CROTON CHLORAL.

This drug is said to possess the singular property of producing *anæsthesia of the brain and nerves of the head,* leaving all the body

of jaundice, and have never failed to remove it in but a single instance, and that one I think was a case of obstruction of the gall-ducts by calculi; in that case I tried all the reputed cholagogues without success. It removes jaundice of years' standing in from eight to ten days. I have treated several persons who had been subject to jaundice annually, in summer, for several years, and had been dosed with blue pill, calomel, and other articles without any benefit, and I have not failed in a single instance to remove the disease entirely. And when it is removed by the Chionanthus, it does not return—at least it has not in any instance to my knowledge."

This is very positive testimony. He adds that it is not a purgative—which would go to prove that it was a true hepatic remedy.

The tincture of the bark should be made with strong alcohol, and given in ten or fifteen drops every three hours.

CIMICIFUGA RACEMOSA.

We now come to speak of one of the most important of all the *new* remedies. It is to the new, what Ignatia was, and is, to the Materia Medica of Hahnemann. Its range of action is quite extensive; it has been quite thoroughly proven; the clinical experience with it is already large; and it has large possibilities for future development.

It is known under the common names of black snake-root, black cohosh, and rattleweed. Its former botanical names were Actæa and Macrotys, from which latter came the name of its active principle Macrotin. (Now *Cimicifugin.*)

Sphere of action.—It is essentially a cerebro-spinal remedy. The brain and spinal cord are directly under its influence, and upon which it acts primarily as a *depressing* irritant.

Its action on the *muscular system* is probably not direct, but a result of its effect upon the spinal cord. It differs from Nux and Ignatia, in that they are *exciting* irritants of the spinal cord. Cimicifuga indirectly affects the vegetative system—the functions of digestion and assimilation. It has but few symptoms of gastric or intestinal derangement not due to reflex irritation.

It has become one of our most potent remedies in disorders of the *mental sphere*, namely, in *melancholy and aberration of mind.*

The characteristic symptoms indicating its use are: "Great melancholy; she feels grieved; troubled with sighing; sensation as if a heavy black cloud had settled all over her, and enveloped her head, so that all was darkness and confusion, while at the same time it weighed like lead upon her heart." (Cured by Dunham with the 200th, and by myself with the 3ˣ dil.)

"She was suspicious of everything and everybody; would not take medicine if she knew it; indifferent, taciturn; takes no interest in household matters; frequently sighs and ejaculates; great apprehensiveness and sleeplessness."

These symptoms are always promptly removed by Cimicifuga. The size of the dose, if it is above the 1ˣ, does not seem to be important. I have treated very many cases of profound melancholy, even from disordered liver, by this medicine, and can assure you that it has cured the majority, and even when the disorder of the mind depended on incurable physical disease its palliative effect was remarkable. One keynote to be remembered, is *sleeplessness.* Many physicians have informed me that if, in cases of melancholy, *sleeplessness* was present, Cimicifuga nearly always cured.

Delirium tremens.—In this terrible disorder the Cimicifuga is indispensable. When there is nausea, retching, dilated pupils, heavy pressing-out headache, trembling of the limbs, incessant talking, changing from one subject to another, obstinate sleeplessness, imagines strange objects on the bed, rats, sheep, etc., with quick, hard pulse, and a peculiar wild look in the eyes, the 3ˣ dil. frequently repeated, aided by a good diet of milk, wine, whey, mutton broth, etc., will soon restore the patient.

A lady patient of mine who was taking five drops of the 1ˣ for rheumatism, was annoyed by an illusion of a *mouse running from under her chair.* This illusion disappeared upon suspending the medicine, and recurred when taking it in the same doses.

I have found it useful in *puerperal mania,* and in those depressed states of mind and body following the excessive use of *tea, valerian,* and *morphia.*

The *nerves of sensation* are very unfavorably affected by massive doses. It causes a pure *neuralgia,* and what the older authors called *neuralgic rheumatism. The neuralgia* is not confined to any

particular set of nerves, as is the case with some remedies. Its depressing irritant action seems to be universal. The pains are aching, pressing, remitting, and are attended with great restlessness and a weak, exhausted feeling. It seems to affect the sensory nerves of the *left* side most. The *nerves of motion* are profoundly irritated. In the words of Dr. T. C. Miller, whose experience with it for fifteen years enabled him to judge of its powers: "It is one of the most remarkable remedies in all diseases of the ganglio-spinal system, particularly when the motor side is excited, and yet, in the whole, prevails an atony in the muscular and nervous system."

This statement of its pathological action gives us the clue to its wonderful efficacy in *chorea*. It is indicated in many kinds of chorea, whether arising from rheumatic irritation of the cord, from uterine disease, or from purely psychical causes. The symptomatic indications are chiefly: abnormal movements, uncontrolled by the will, in all those parts of the body supplied by motor nerves; it affects both voluntary and involuntary muscles. The motions consist of twitching, jerking, twisting actions; they are sometimes attended by pains like neuralgia or rheumatism. The movements abate or are absent *during sleep*. They are aggravated by emotions; at the menstrual periods; or are caused by suppressed menses. They are attended by depression of spirits, and sleeplessness, and often by mental derangement.

The Cimicifuga is useful in many kinds of *tremors* which resemble St. Vitus's dance, but due to functional derangement of the nerve-centres. If they are caused by structural changes this remedy is useless, or if they are caused by mercurial or other mineral poisoning.

I do not think the Cimicifuga will be found very useful in convulsions of any kind, unless they resemble chorea; consequently it will not be available in ordinary puerperal convulsions or epilepsy.

It bids fair to become a prominent remedy in *cerebro-spinal meningitis*, and possibly *myelitis*.

Dr. W. S. Searle, of New York city, first called attention to it in the "Transactions of the New York Homœopathic Society," and gave his experience of its use in a case of the former disease,

when, after the inflammatory period had passed, the patient was tormented day and night by *alternate clonic and tonic spasms and obstinate vomiting*. Since Dr. Searle's observations were published I have used it in many cases of cerebro-spinal trouble, and with unvarying success. Those of you who have been in practice, or have observed the practice of your preceptors, must have noted the prevalence of more or less *cerebro-spinal irritation* in nearly all fevers and some other diseases, and occurring in the winter and spring months. It is only within a few years that these phenomena were of such frequent occurrence. As the late Dr. Williamson used to say: "It has become the *genius* of the prevailing maladies." Cimicifuga, in the lower dilutions, is indicated in the three grades of this disorder, namely:

Cerebro-spinal meningitis, in the 6ˣ dil.

Cerebro-spinal congestion, in the 2ˣ dil.

Cerebro-spinal irritation in the 1ˣ dil.

I will give you the indications for its selection:

Delirium, like mania à potu, with nausea, retching, dilated pupils, tremor of the limbs; quick, full pulse, and wild look out of the eyes.

Headache; pain over the eyes, extending along the base of the brain into the occiput.

Brain feels too large for the cranium, a pressing from within outwards; or a sense of compression in the temples.

Excruciating pain in the forehead and in the eyeballs, vertex, nape of the neck, and occiput, with fulness and throbbing, as if the top of the head would fly off.

Dull pains in the occiput, with shooting pains down the back; the head is jerked backward.

Intense pain in the eyeballs, with black specks before the eyes; dilated pupils; double vision; congested conjunctiva, and lachrymation.

Intense throbbing pain, as if a ball were driven from the neck to the vertex with every throb of the heart.

Tongue swollen; breath offensive; pharynx dry; dysphagia; roughness and hoarseness of the voice.

Nausea and vomiting attend the pain in the head.

Pains in the back, of a drawing, tensive character, or dull and heavy, with tenderness on pressure.

Alternate tonic and clonic spasms, night and day.

Spasmodic jerkings, like chorea.

Rigidity of the muscles of the neck and back.

Intense aching pains in the neck, head, and all the joints of the extremities, like the pains which accompany the fever of variola.

Eruption of white pustules on the face and neck; sometimes large, red, and papular.

There is a disorder, known at one time as "spinal irritation." It is now known that in the great majority of cases it is not a spinal but a muscular affection, and its proper name is *myalgia*. In this disease Cimicifuga is one of our best remedies, rivalling Arnica, Hydrastin, or Nux. This leads us to consider its action on the muscular system. It is curative in two kinds of muscle disease:

(1.) *Myalgia*, or a loss of tonicity in the muscular fibre, probably from atony with irritation of the nerves which supply them. Myalgia in its various forms includes, certain *headaches from an affection of the muscles of the head and nape, pleurodynia, myalgic colic, stiff neck, "crick in the back,"* and *burning, cramping, stitching, aching* pains all over the body, and even in hollow internal organs.

(2.) *Myositis*, or inflammation of muscular structures, either idiopathic or rheumatic. It seems to affect by preference the *belly of the muscle*. *Arnica* acts in a similar manner, but it is better for *traumatic* myalgia and myositis; Bryonia resembles Cimicifuga, but the cause of the Bryonia muscular disease lies more in the state of the blood and secretions than in the state of the nervous centres. Bryonia does not cause *reflex* muscle disorder. Cimicifuga does (so does Caulophyllum). Hydrastis differs from both and resembles China and Ferrum more nearly.

In *inflammatory muscular rheumatism* Cimicifuga has always had a deserved high popularity, both with physicians and laymen. The rheumatic fever, for which it is specific, is marked by several very characteristic symptoms, namely, the *suddenness* of its onset, the *severity* of its manifestation, and its location in *large muscles*.

In such cases it often acts with surprising rapidity, relieving the fever, pain, soreness and restlessness in a few days.

It differs from *Rhus* in *not* acting on the tendons, or terminal attachments of muscles, and from Colchicum, Bryonia, and Asclepias, in *not* acting on serous tissues; at least I do not think it has that affinity for serous tissues which is possessed by other well-known medicines.

I would not give you the impression that Cimicifuga is not useful in *chronic rheumatism*, for some of its most brilliant achievements have been in that direction. But in such cases the location of the disease has been in the belly of the muscle, *i. e.*, its longest or middle portion, and its *inception was originally sudden and severe.*

In my practice, and those of my colleagues, also in the practice of the eclectic and allopathic schools, it has made some surprising cures of *chronic inflammation of the cervical and lumbar muscles* ("stiff neck" and lumbago); in chronic inflammation of the muscles of the upper and lower extremities, *and intercostal rheumatism.* I remember one case, the mother of Clara Louise Kellogg, the *prima donna*, who had for many years such stiffness, pain and lameness of the muscles of the thighs that her sufferings were at times intolerable. After trying faithfully Rhus, Nux vom., Bryonia, Turpentine, Sulphur, etc., she took ten drops of tincture Cimicifuga three times a day, which accomplished the removal of the disease within a few weeks.

The *febrile* symptoms of Cimicifuga are more *erethistic* or irritative (reflex or sympathetic) than inflammatory or synochal. It will rarely be useful in the *fevers*, except as an intercurrent remedy.

In the *exanthematous fevers*, it has not been specially recommended, except by Drs. B. L. Hill and D. S. Smith, who used it in *variola and varioloid.* It certainly does seem indicated in the *first* stage of small-pox, for the intense aching in the extremities, head, and back resemble the symptoms of that disease. It even causes "white pustules on the face and neck." I would advise you to keep this remedy in mind in the treatment of variola.

I have found it useful in the *myalgic troubles which often follow scarlet fever.* It relieves those intolerable pains in the back and

limbs, the stiff neck, and muscular cramps, which are such painful sequelæ of that malady.

Nightsweats, when not due to suppuration or anæmia, but to some fault in the proper supply of nervous energy to the skin, are readily arrested by Cimicifuga.

In the provings, you will observe that *cold sweat* was quite a common symptom, especially after 3 A.M., sometimes lasting all day, with weak, irregular pulse, and pain under left breast.

You will find these symptoms very common in women, and sometimes men, whose nervous system has been weakened by long illness, trouble or care; and you will find in all such cases that the Cimicifuga, in the 3x to 6th dilution, will prove an admirable restorative.

No drug in our Materia Medica uniformly causes such severe pain in the head, both internal and external.

Internally it causes passive congestion or anæmia, according to the constitution of the prover. Externally it causes pains in the muscles, and the nerves supplying them.

The character of the pains and distress are, internally: "a sensation as if the temples were compressed,"—dulness and heaviness in the head, as if he had been on a "spree;" head felt as if it had been pounded, *full* of something heavy; moving the head or turning the eyes causing a sensation as if the cranium was opening and shutting; head feels as if he had been without sleep a long time; brain feels too large for the cranium, pressing from *within outward;* severe pain in the forehead, extending to the temples and vertex, with fulness, heat, and throbbing; when going up stairs, a sensation as if the top of the head would fly off; excruciating pain in the forehead, with coldness of the forehead, and severe pain in the eyeballs. Nearly all the pains in the head *extend to the eyeballs;* they are aggravated by movement, relieved by the open air; attended by faintness and "sinking," at the pit of the stomach.

Externally it has severe pain over the right or left eye, extending into the eye, and back into the base of the brain; pain over the eyes, extending along (around) to the base of the brain and occiput, and nape of the neck; pain in the occipital region, with shooting pains down the back of neck; dull, boring pain

over the left superciliary ridge, at 10 A.M.; pains in the occiput, extending to the vertex.

All these symptoms are trustworthy, and have been verified by clinical experience.

Cimicifuga is indicated in

Headache resulting from loss of sleep, night-watching, and abuse of alcoholic drinks; from mental strain and worry of mind; and from exposure of the head to draughts of cold, damp air.

It is useful in the following kinds of cephalalgia:

Congestive headache (passive, perhaps active).

Nervous headache (periodical or remittent).

Rheumatic headache (in the muscles—catarrhal).

Hysterical and menstrual headaches (at change of life).

Cerebro-spinal headaches.

In the cerebral irritation of children during teething, when they are fretful, feverish, sleepless, the 6th or 30th has a soothing effect.

I do not think you will find it useful in acute cerebritis or meningitis, but it *may* be in the chronic.

Its analogues in *head affections* are Bryonia, Spigelia, Glonoin, Nux Vomica, and Ignatia.

The *eyes* are severely acted upon by Cimicifuga. Few drugs cause such intense and persistent pain in the *eyeballs*. The pains are chiefly *aching*, extending to different portions of the head. Many of the pains, however, seem *fixed* in the centre of the eyeball, and simulate *rheumatic and neuralgic* affections of the eyes. In some cases the eyelids become inflamed. One characteristic of the eye affection is that in the majority of cases *no redness of the eyeballs exists;* in other cases, as in Dr. Hill's proving, the "eyes were congested, so as to attract the attention of every one, although there was no disagreeable feeling in them." This discrepancy is probably owing to some difference in the constitution or idiosyncrasy of the prover.

It will probably be found useful in the painful sensitiveness of the eyes known as "*ocular hyperœsthesia,*" for which Spigelia is such an excellent remedy. Both should be used in the high potencies for this affection.

It is reported to have cured *catarrhal conjunctivitis;* and should be tried in *sclerotitis rheumatica.*

It causes amaurotic symptoms, "black specks," and "double vision," both of which it has cured.

The catarrhal symptoms, especially of the nasal mucous membrane, are very decidedly shown in all the provings. But it has no special reputation in ordinary catarrh or influenza. It affects the laryngeal and bronchial mucous membranes in a similar manner. A study of the provings will show, however, that the catarrhal irritation rarely goes beyond the *serous* stage.

I think the Cimicifuga catarrh is in keeping with its rheumatic symptoms. In other words it causes a *catarrh which precedes a rheumatic attack.* Dr. Hill suggests that it causes catarrhal conditions similar to those produced by a sudden change in winter from a cold day to damp thawing by a south wind that melts the snow. Now this is the very atmospheric condition that causes the severest kind of rheumatism.

In *rheumatic sore throat, rheumatic prosopalgia, and toothache,* when preceded by the above catarrhal conditions, it is clearly indicated.

The older authors recognized a rheumatic bronchitis and pneumonia. Given the other symptoms of Cimicifuga, I should not hesitate to advise it in acute bronchitis and pneumonia, preceded by the characteristic catarrh.

It is indicated for the premonitory symptoms of *diphtheria,* but does no good afterward.

The action of Cimicifuga on the stomach seems to arise from its depressing effect on the solar plexus and its sympathetic nerve connections. It resembles the action of Sepia, Digitalis, Murex, and Ignatia, all of which produce, like Cimicifuga, that peculiar sensation of *faintness, sinking and emptiness* which attended all the provings. This sensation was sometimes attended with nausea and vomiting. This *faint* sensation alternated during the same day with a sensation of *fulness or repletion.* Both sensations resulting from a depression of the same nerve.

In the *nausea and vomiting* of drunkards, tea-drinkers, and pregnant women, when attended by the above morbid sensations, it will act curatively.

It is well indicated in the vomiting which precedes cerebral and

spinal irritations, and the vomiting which is sympathetic with, and resulting from, nervous headache.

There are three diseases of the abdominal structures in which you will find Cimicifuga useful: (1.) *Rheumatism of the muscular tissues.* (2.) *Neuralgia*, often mistaken for peritonitis, especially if it occurs after miscarriage and confinement. (3.) *Rheumatic neuralgia.* It does not seem to be homœopathic to, or useful in any abnormal discharge from the bowels.

It increases the quantity of urine, which is pale and limpid. Take the symptoms in connection with the general nervous depression, sinking at the stomach, etc., and we have good data for prescribing it in *nervous diabetes*, or that condition which frequently precedes or follows nervous attacks of various kinds, hysteria, and the like.

The symptoms of the male genital organs are those which might attend general rheumatic irritation, affecting the spermatic cord and testicles. Its curative action in some cases of spermatorrhœa and its consequences is undoubted.

Cimicifuga is one of our most important remedies in many of the diseases of women.

In *amenorrhœa*, or delayed appearance of the menses in young girls, from deficient nervous energy in the ovaries, and when the abnormal nervous influence is directed to other organs, giving rise to chorea, hysteria, nervous headaches, etc., the Cimicifuga will restore the functions of the reproductive organs to a normal state. Should there be, at the same time, with the above conditions, a chlorotic state, Helonias or Ferrum should be alternated with this remedy.

In *retarded menstruation*, when Pulsatilla or Senecio are not indicated, and when at the usual menstrual period the discharge does not appear, but in its place comes a pressive, heavy headache, melancholy, palpitation of the heart, and other reflex symptoms, in these cases the Cimicifuga will restore the normal condition of the system and cause a regular return of the menses.

In *suppression of the menses* from a cold, mental emotions, or febrile conditions, when rheumatic pains in the limbs, or intense headache, or uterine cramps are present, this remedy will be found very useful. In *dysmenorrhœa* the black snake-root has been used

successfully by all schools. The eclectics consider it a sort of panacea. Many of our own school speak highly of its value. Dr. Hill, in his "Epitome," advises it in all cases, in alternation with Caulophyllum. It is not a general specific, yet it will benefit a majority of cases. It is most useful in rheumatic and neuralgic cases, but is often of benefit in congestive dysmenorrhœa, when alternated with Veratrum viride, or Belladonna. The best method of administration in these diseases is to give Cimicifugin, first decimal, or one-hundredth, three or four times a day during the intermenstrual period, and every hour or thirty minutes during the severity of the pain. The Cimicifugin, second or third decimal trituration, will in some cases act more satisfactorily than the tincture. Several of my colleagues have reported cases of dysmenorrhœa cured or very much relieved by it. They think more highly of the Cimicifugin in the neuralgic type than of Caulophyllin. The latter is more indicated in cases complicated with uterine spasms or general hysterical convulsions. Dr. Williams sends me the record of two severe cases of dysmenorrhœa, probably of a rheumatic origin, which were apparently cured under the action of Cimicifugin 1st. I have treated many cases of difficult and painful menstruation, arising from various causes, and while in all there was improvement, in many the morbid condition seemed to be permanently removed. I consider the following symptoms as indicating its use: *Before* the menses, the peculiar headache similar to that caused by this medicine; *during* the menses, aching in the limbs, severe pain in the back, down the thighs and through the hips, with heavy, pressing-down, laborlike pains, weeping mood, nervousness, hysteric spasms, cramps, tenderness of the hypogastric region, scanty flow of coagulated blood, or profuse flow of the same character; *between* the menses, debility, nervous erethism, neuralgic pains, tendency to prolapsus, etc. It is useful in *menorrhagia*, when the flow is profuse but of a passive character, dark, coagulated, and accompanied by the above-mentioned pains. The Cimicifuga does not primarily cause hæmorrhage like Sabina, Erigeron, or Crocus, but secondarily, by impairing the tonicity and normal vitality of the uterus.

In *leucorrhœa*, the eclectics speak highly of its efficacy. The late Dr. Morrow, to whom is mainly due the introduction of the

remedy into that practice, gained much celebrity by his treatment of leucorrhœa with the internal and local application of the Black Cohosh. He gave it until it produced and kept up its peculiar action on the brain in slight degree; a decoction of the root as an enema was used every day. Leucorrhœa may be vaginal, cervical, or uterine. In the present state of our knowledge of the action of the drug, we cannot point out accurately the particular form of leucorrhœa for which it is indicated. It may be beneficial in all varieties; the general symptoms must, to a great extent, be our guide. Dr. Hill mentions a "leucorrhœa of long standing cured during a week's proving," and another case of "leucorrhœa, and chronic inflammation and congestion of the uterus, cured during the proving, while no other symptoms were observed on the provers until the disappearance *of the uterine disease.*" Believing in the local as well as general action of a drug, I would advise it to be used both topically and internally. The lower dilutions seem to act most beneficially. It is now more than sixty years since it was claimed by Stearns, in the "American Herbal," to have an especial affinity for the uterus, particularly over the menstrual function, and Dr. Tully regards this claim as well established by the experience of New England practitioners.

As a *parturifacient* it was in general use among the Indians in the early settlement of this country. Bigelow speaks of it as an active agent in facilitating parturition; and Tully says he has known many cases where it has produced abortion in pregnant women, when prescribed for a cough. The evidence on this head is far more full and satisfactory than in regard to its emmenagogue properties. Prof. Lee says: "It is believed to exert a specific influence on the uterine contractions, lasting longer than that of Ergot, and followed by less torpor and greater susceptibility and capacity for action in the uterus than before its employment. Its operation, also, is not attended by that deleterious and stupefying influence on the fœtus which often follows the administration of Spurred Rye."

It is doubtful if the Ergot acts medicinally on the fœtus at all. It is the continued, unintermitting pressure of the uterus upon the child, or the cord, which causes the coma or asphyxia in the infant before birth.

"After delivery," adds Professor Lee, "it has also been extensively and successfully used for the purpose of inducing firm uterine contractions, expelling the placenta, and checking post-partum hæmorrhages. For this purpose a drachm of the saturated alcoholic tincture should be given every half hour, or oftener, until the desired effect is produced." (This dose is enormously large and unnecessary. *Ten* drops is sufficient.) A knowledge of the uterine-motor action of Cimicifuga should be appropriated by homœopathists. They are capable of making much more valuable use of such knowledge than the adherents of other schools of medicine. The homœopathic school gladly avail themselves of the use of Ergot in slow and difficult labors arising from an atonic condition of the uterus, or perverted function. I can not give my assent to those mythical relations of the effects of the Secale third or thirtieth, in causing uterine contractions when deficient during labor; the proof is not sufficient. I consider the Cimicifuga, as well as Secale, Caulophyllum, and other drugs, possessing similar powers, as being *secondarily* homœopathic to conditions of uterine inertia.

To explain: The *primary* action of Ergot in moderate medicinal doses is to cause contractions, more or less persistent, of the muscular tissues of the uterus. Under the continued action of the drug these contractions will become more intense and firm, until, from over-stimulation, an opposite condition or muscular atony obtains. Now, this latter condition, with its accompanying symptoms, is a secondary effect of the drug, as much due to pathogenetic action as was the primary. When, in practice, we meet with similar conditions, *i. e.*, when the uterus, after vain and powerful efforts, becomes exhausted, Ergot is the proper remedy if the primary symptoms correspond with those of the drug, viz., persistent and violent contractions. But if the uterine atony be caused by Ergot, then that medicine will not answer our purpose, and we must resort to Cimicifuga, Caulophyllum, Cannabis, or galvanism. Secondary states of uterine muscular atony may be brought on by all the last-named agents, and for this reason they will all be found useful in similar morbid conditions. The *dose* which should be used in such cases should be as large as can be given with safety to the patient, and just large enough to arouse the torpid muscular tissue. My theory of *dose*, which experience strongly substan-

tiates, is, that for symptoms which simulate the primary effects of the medicine selected as the remedy, minute doses should be administered; but larger doses for symptoms simulating its secondary effects. In resorting to the Cimicifuga in atonic labors, we need not give the massive doses of the eclectic school—doses which tend to bring on secondary exhaustion. I have found five to ten drops of the mother tincture, every fifteen or twenty minutes, to be amply sufficient to bring back or arouse the deficient vitality of the uterus. But there is an opposite condition of the uterus which sometimes obtains during labor, a state of hyperexcitation, in which the normal uterine contractions are spasmodic, painful and intensely powerful, but *intermitting;* sometimes with cramps in the extremities, and a tendency to general convulsions. Here the Cimicifuga is primarily homœopathic, and a small quantity of the third or sixth attenuation will suffice to restore the normal parturient action. This medicine will be found useful after labor, in producing firm contraction of the uterus, expelling the placenta, or checking post-partum hæmorrhage. But I think for this purpose the Secale is to be preferred, because of its power to cause firmer and more *persistent* contraction.

After-pains are often readily relieved by small doses of Cimicifuga, second or third, or Cimicifugin third. I have used it with signal benefit in those cases which seemed to be kept up by a neuralgic disposition, or mental and nervous irritability, and the patient was sleepless, restless, sensitive, and low-spirited.

Suppression of the Lochia is treated successfully with this remedy. When from a cold or mental emotion the discharge is arrested, uterine spasms and cramps in the limbs sometimes occur, accompanied with headache and even delirium.

A case of this character, which came under my treatment, was relieved in a few hours by Cimicifugin, second trit., two grains every half hour. Warm fomentations were applied to the abdomen and vulva, as should always be the practice in such instances.

It is also useful for the relief of those bearing-down pains, indications for prolapsus, which women frequently suffer from after severe confinement. It is eminently homœopathic to a tendency to *abortion*. It has caused abortion in many instances, and is commonly resorted to for that purpose by reckless women, and

advised by still more reckless physicians. It has been successfully used in instances of "habitual abortion," with the result of preventing the usual miscarriage in the second and third months. But unless the general symptoms correspond, Caulophyllum, Sabina, Viburnum, or Helonias will have to be selected. When the chill, uterine pain, tenderness of the hypogastric region, and flooding, have already set in, and the loss of the fœtus becomes imminent, the Cimicifuga in small doses may arrest the progress of the morbid process, provided the membranes have not become extensively detached. If the separated portion be slight, and the patient be kept quiet, and the proper remedies given (Aletris viburnum), I believe it possible to prevent a further separation. If all hope of saving the fœtus be abandoned, and the uterus is deficient in expulsive power, then this medicine may be given, as recommended for uterine atony in labors.

But no physician should rely alone upon medicinal action in such cases. The sponge or sea-tangle tent, placental forceps and blunt hook, should be used early and efficiently, to effect the entire removal of the contents of the uterus.

Sterility, when not due to extensive ulceration, or other structural changes in the uterus, may be cured by Cimicifuga. Among the causes of sterility, by which I mean, inability to *conceive*, which are removed by this remedy, are *congestion of the cervix*, thereby closing the cervical canal; deficiency of nervous energy, accompanied with melancholy; feeble circulation, scanty menstruation, lack of sexual desire, etc.

Prolapsus uteri is often removed by this remedy, especially when occurring in nervous, melancholy subjects, and is the result of abortions, cervical congestion, or deficient nerve-innervation. Two key-symptoms indicate it in prolapsus, namely, melancholy, and "sinking" at the pit of the stomach. Helonias also has the former and Sepia the latter, but in both I think the pathological conditions are different from those cured by Cimicifuga.

Ovarian disorders, of a *nervous* rather than inflammatory or structural character, will often find a specific in Cimicifuga. *Ovarian neuralgia* is perhaps as often cured by it as by any other remedy. In this affection it is specially indicated when the ovarian pains are reflected, or change their location to other portions of the body, as the leg of the same side, the region under the left

breast, or extend up the whole side to the shoulder. It causes congestion of the head, the uterus, and other organs, and, very likely, the ovaries. As ovarian disorder is usually attended with abnormally depressed states of mind, the Cimicifuga is as often indicated as Platinum, with which it closely affiliates in many respects.

In *puerperal mania* it has been found curative by all schools. Many cases successfully treated by it have been published in our literature, some in the eclectic, and a few in the allopathic. The late Professor Simpson reports a case called by him "puerperal hypochondriasis," in which he had tried all the usual remedies. He gave the enormous dose of fifty drops of the tincture thrice a day. He says: "In eight or ten days she was altered and changed in a marvellous degree, but all for the better. On the third or fourth day, she informed me that the cloud of misery which had been darkening her existence suddenly began to dissolve and dispel, and in a day or two more she felt perfectly well again, in gayety, spirits, and energy." He adds that nothing would induce her to give it up, but took it for six weeks longer! And no pathogenetic symptoms! What will the ultra high dilutionists say to this? Does it not prove that the danger of medicinal aggravations from appreciable doses is very much aggravated? The fact is, that if a medicine is homœopathic to a case, it will cure in any dose, in a high or low attenuation. (See Dr. Dunham's cure of just such a case as the above with the 200th.)

Dystocia is one of those abnormal conditions which come clearly under the domain of homœopathic medication. It is useless to cling to the antiquated superstition that a woman *must* suffer "pangs of childbirth." Dystocia is always the result of an abnormal condition of the tissues concerned in the functions of childbearing. I do not wish to have you understand that a majority of cases of painful labor can be remedied by medicines. I have attended very many women who did not suffer to any degree; they expressed themselves as caring very little for the pains. Nor were these women *all* healthy. But this abnormal phase was somehow absent, or nearly so. I have also attended many women whose previous labors had been exceedingly painful, almost unendurable without Ether, but, owing to the administration of Cimicifuga

during the last weeks of pregnancy they suffered very little. So many of these cases have occurred in my practice and in that of my colleagues, that it is not proper to affect skepticism or unbelief. As a rule, first labors are painful and protracted, while subsequent ones are less so; but if five or six are very painful, and each one seems to be more painful than the last, we cannot expect the seventh to be painless, except from some remedial interference. Now, if in such cases Cimicifuga, Caulophyllum, or Viburnum is given, and the woman's next labor is easy, what are we to think? Evidently, that the medicine effected a change of condition from abnormal to normal.

In such cases give the Cimicifuga at least two weeks previous to the expected date of labor, in doses of one to ten drops, two or three times a day; the doses repeated oftener as the date approaches.

In *irritable uterus*, that condition once described by Gooch, and lately declared by Hewitt to be a condition of *flexion*, the Cimicifuga is an admirable remedy when the pains seem like those of rheumatism or neuralgia. If they are decidedly spasmodic—crampy—Viburnum is the specific. In irritation of the uterus, such as occurs at the *change of life*, when the menses are irregular, and the pains are more or less periodical, in the lumbar regions, or in the side, or in the top of the head, at night, this remedy rarely fails to relieve.

Mammary pains of a reflex character, occurring during pregnancy, with dysmenorrhœa, or at the climacteric, and even after confinement, are also included in the curative sphere of this medicine.

Phlegmasia alba dolens is not always *alba*. The swelling is sometimes very red, and assumes all the characters of acute rheumatism. In such cases Cimicifuga is the remedy. It is *not* the remedy *alone* when it is due to *septicæmia* or absorption of morbid secretions, in which case Baptisia, Arsenicum, and Carbolic acid should be used. But this disease is sometimes the result of exposure, added to the contusion of the veins and nerves, and calls for Cimicifuga, Aconite, Arnica, Apis, and Hamamelis.

(I do not advise "*Macrotin*" in all cases, because I do not believe it contains *all* the medical properties of the drug, any more than Liebig's Extract of Beef contains all the nutritious qualities

of beefsteak. It may prove useful in a large proportion of cases, but when it fails you will often find that the tincture of Cimicifuga will cure. I adhere to the name of Cimicifug*in*, because both "Actæa" and "Macrotys" are obsolete according to recent botanists. The active principle, moreover, should be called "Cimicifugin." Remember, too, that you should not order the "tincture of Macrotin," as has been done.)

The *laryngeal and bronchial irritations* of Cimicifuga are either *reflex* or *rheumatic*. It has cured the *reflex cough of pregnancy and uterine irritation*. I can hardly understand the high estimate by which it was held by Drs. Tully, Hildreth and Lee (allopaths) in pulmonary affections. Here is what they say of it:

Dr. Gardner used it in his own case for the following symptoms: Pulse 100 to 120, harassing cough, purulent expectoration, pains in the right breast and side, hectic paroxysms, loss of flesh and strength, frequent hæmoptysis, and deranged stomach and liver; cured in a few months.

Dr. Hildreth says: "In phthisis, in nearly every instance the pulse was reduced to near the natural standard, the hectic symptoms disappeared, and with it the cough and other symptoms." He also removed "those intermittent congestions and inflammations so frequent in the second and third stages of phthisis, when they arose from atmospheric exposure."

Drs. Lee, Wood, and Chapman give similar testimony. In homœopathic practice it has not succeeded in getting a reputation in pulmonary troubles, although it has an excellent one in *pleurodynia and intercostal rheumatism*, both of which conditions are found to be present in nearly all cases of *pulmonary phthisis*.

I would suggest its more extensive use in chronic diseases of the lungs, not alone, for I doubt if it affects the parenchyma of the lungs, but in alternation with Sanguinaria, Phosphorus, Kali carb., Stannum, and others.

In *pleurisy* it may be useful, but I prefer Bryonia. They act very well in alternation, in both pleurisy and pleurodynia.

For those obstinate *reflex pains in the left side*, occurring in women, generally the unmarried, this remedy is as nearly a specific as can be.

These pains are said to arise from uterine or ovarian irritation.

They occur "under the left mamma, or under both; they often extend up to the left shoulder and down the arm; they frequently change to other localities, as the back, neck, and head."

Under the use of Cimicifuga, 1x, they are nearly always palliated and cured if no structural lesion exists in the uterus or ovaries.

Diseases of the heart are cured or greatly palliated by Cimicifuga. It is useful in

Endocarditis, especially idiopathic or rheumatic.

Pericarditis, in alternation with Aconite, Spigelia, or Bryonia.

Cardiac myalgia, which is often mistaken for true angina pectoris.

Cardiac debility, characterized by irregular palpitation, with intermitting and weak pulse.

Its symptoms are so similar to Digitalis, that it is often impossible to select between them. The history of the case will decide. If the symptoms of cardiac debility are primary, *i. e.*, arising from nervous atony, the Cimicifuga is primarily indicated. If the condition is a secondary one—arising from previous excitement—Digitalis is better indicated.

Chorea of the heart—a disorder now admitted to exist, even when no other choreic symptoms appear. It is characterized by *tumultuous, irregular, unexpected, and strange motions of the heart*, aggravated by emotions, and subsiding during sleep.

I have cured with it many cases of cardiac disorders, such as I have just mentioned, and consider that in its sphere Cimicifuga is one of our most potent cardiac remedies. It is a veritable polychrest, with a marked individuality, and will do good service in practice.

CISTUS CANADENSIS.

The Rock-rose, or Ice-plant, has long been esteemed as a popular remedy in Scrofula. It was partially proven and incorporated into our Materia Medica by Dr. Hering, who had a high estimate of its properties. He suggests that as it grows by preference in a soil abounding in Magnesia (talc), it ought to follow Magnesia. Is Magnesia one of its inorganic constituents? If so, some Magnesia symptoms might be cured by it. A study of the pathogenesis cannot fail to impress you with its similarity to some

of the antipsorics, namely: Calcarea, Corydalis, Graphites, Hepar sulphur, Phytolacca, and Stillingia. It has some resemblance to Belladonna, Paris quad., Kali bich., and Lachesis, especially its throat symptoms. Like the above antipsorics it has made some brilliant cures of *swelling and suppuration of the cervical and lymphatic glands.*

It has cured *scrofulous abscesses* located on the neck, shoulders, hips, and other portions of the body. *Scrofulous hip disease* (called "white swelling of the hip"), with fistulous openings leading to the bone, and ulcers on the surface, with nightsweats. This case was cured in thirty-nine days by a decoction of the plant. *Eruptions:* scrofulous; tetter; chronic erysipelas; boils beginning with a blister; and lupus of the face, all come under its curative power.

It has a decided affinity for mucous membranes, or rather for the glandular structures imbedded in them.

Beginning with the eyes, you will find it has cured *scrofulous ophthalmia;* in the mouth, *scorbutic gums, swollen, separating from the teeth, bleeding easily, putrid.* In the throat and air-passages it gives us a vivid picture of *chronic catarrh* with *strumous disease of the glands* of those passages.

I am surprised that with the following striking symptoms, it has not been used to a greater extent by all physicians. It causes dryness of the tongue and roof of the mouth. Inhaling cold air caused soreness and pain in the throat, feeling of dryness, heat, and as if sand was in throat. Rawness extending from the chest into the throat. He is constantly obliged to swallow saliva to relieve an unbearable dryness, especially at night, or from 1 P.M. to 1 A.M.

A small dry spot in the gullet (?) for a year, then general dryness of throat, better after eating, worse after sleeping, as if tearing asunder; he must get up and drink water; the inside of the throat looks glassy; on the back of the throat are strips of tough mucus (Lachesis, Kali bich.).

Periodical itching of the throat; tickling and soreness of the throat; in morning sore pain and dryness of throat. (Hep.) Tearing pain in the throat when coughing; stitching in the throat causing cough; cough aggravated by every mental excitement (Phos.); expectoration of bitter mucus. Fauces inflamed and dry,

without feeling dry; tough, gumlike, thick, tasteless phlegm, brought up by hawking.

I would advise you to use it in the catarrhal throat and bronchial affections so prevalent nowadays.

In domestic practice, I frequently hear it highly lauded for *chronic diarrhœa and dysentery.* Dr. Comstock, of St. Louis, reported several cures from the use of the infusion. In Hering's provings the following symptoms appear:

All night, till daybreak, thin stool, squirting out, grayish-yellow in color, thin and hot.

The chronic dysentery which it cures is probably of the same nature as the chronic laryngitis and bronchitis.

COCA.

The leaves of the plant *Erythroxylon Coca* have, from the earliest authentic accounts, been used by the natives of Peru for the purpose of stimulating the nervous energies, much as the Chinese use tea, the Arabians coffee, the Asiatics Cannabis indica, and the American aborigines tobacco. Every nation has its peculiar nervous stimulant, which is at the same time, in different quantities, a calmative or nervine. Coca is an analogue of Paullinia, Scutellaria, Cypripedium, and Valeria, as well as the other nerve stimulants above named. The *primary* action of this whole class is to *excite* the energies of the nerve-centres. While the system is under their primary effects, the person is enabled to perform more arduous labors, severer exercise, and stronger mental exertions. The thoughts flow with unwonted freedom, and the scope of imagination and fancy is enlarged. Sleep is not as necessary to the organism; in other words the system can go longer without the repose of sleep. Unfortunately the *secondary* effects of all this class—if the drug or beverage is taken to excess—is a corresponding depression of the nervous energies, with a loss of the normal capacity for mental and physical labor.

During the primary effects the senses are all more alert, the perceptions keener, and they are not *morbidly irritable;* while a sufferer from the secondary effects finds that he is irritable in body and mind, his nerves have lost their tone, and are shattered in

proportion as he has abused the stimulant. The first use of Coca in the United States was as a tobacco antidote. I do not know the originator, but *suspect* it was the erratic Dio Lewis, M.D. In the many cases in which I saw it tried, no permanent good resulted from its use.

If you will refer to the symptoms of the mental sphere in "New Remedies," fourth edition, you can readily separate the primary from the secondary.

I doubt if the drug will ever come into extensive use in our school in the treatment of diseases, unless they are complicated with or are caused by abuse of other nerve-stimulants. It may be a good antidote to the secondary effects of tea, coffee, and perhaps Opium. You may find it useful in some *nervous affections of the eyes.* It causes white spots, dark spots, and fiery spots before the eyes (Chloral has—"everything looks white").

It has symptoms closely resembling the *dyspepsia and cardialgia caused by abuse of tea and coffee;* it may be worth a trial in such cases.

These symptoms of the respiratory organs are very striking. The natives of Peru after chewing the leaves or drinking the tea are enabled to climb with ease the highest mountains, and carry heavy loads where the air is so rare that the traveller (unless he takes the Coca) can breathe only with the utmost difficulty. It is said to prevent the *hæmorrhages caused by high altitudes and rare air.*

In partial *paralysis of the nerves of respiration* it may be very useful in removing or palliating the distressing *dyspnœa,* or it may be very useful in the dyspnœa of weak persons, who easily get "out of breath" during the slightest physical exertion.

You may find it a valuable palliative in *emphysema* and *pulmonary œdema.* It may even assist in the cure of these distressing conditions.

I have used it with apparent good results in some cases of *functional heart disorder,* and in one of organic disease, to relieve the *excessive dyspnœa.* It palliated some, and seemed to be the chief means of cure in others.

It is indicated in that condition which we so often find in women and children, which is best described by the word "fidgetiness,"

or nervous erethism. The patient can find no rest anywhere; wants to sleep but cannot; finally becomes hysterical; feels like fainting; wants to be alone in the dark. (The Stramonium patient likes company and light.)

In the cases just mentioned the 6th or 30th attenuations appear to be best indicated; while for dyspnœa, the matrix tincture must be used.

CODEINE.

This name is given to one of the alkaloids of Opium. It has been very little used by the allopaths, probably on account of its enormous price, about six dollars per drachm.

The provings do not evolve many symptoms other than we can find in provings of Morphia.

A few homœopathic physicians use it as an anodyne instead of Morphia, but it has no special recommendation superior to the Morph. acet.

Dr. Marcy used it in the 5th dilution in a case of *twitching of both eyelids* after reading, a symptom I have often cured with Hyoscyamus.

He also gave it in *troublesome night cough* of consumptives. It is said to cure severe *neuralgia of the stomach and solar plexus;* but we get this from allopathic authority.

COLLINSONIA.

This indigenous plant has a root so very hard, knotty, and tough that the name of *stone-root* has been given it by the country people.

A thorough knowledge of the qualities of this medicine has not yet been attained. There are many doubtful points about its action which need elucidating.

I propose to give a study of its action based on the *facts* relating to its use. By this method we shall avoid bending the facts to suit a preconceived theory. From all available sources we learn that it has been successful in the treatment of:

(1.) Bruises, sores, wounds, sprains, and contusions.

(2.) Constipation and hæmorrhoids.

(3.) Flatulent colic, indigestion, diarrhœa, and dysentery.
(4.) Dysmenorrhœa, urinary difficulties, and varicocele.
(5.) Hæmorrhage from the lungs.
(6.) Irritable heart.

Now what shall be said of the sphere of action of a medicine useful in those conditions? Is it analogous in its action to Æsculus, Arnica, Aloes, Dioscorea, Hamamelis, Hydrastis, Ignatia, and Sulphur?

I feel inclined to say that its special action is on the *portal system*, and its connections. How else are we to account for its varied action. The question then arises, *how does it act* on this system of bloodvessels? With much hesitancy I will state that I believe its primary action is to *contract the calibre of the portal veins*. I am not sure but it has a similar action on *all* the bloodvessels, and even the heart.

Its common use by the country people, who use it as we use Arnica, and assert that it causes the rapid disappearance of extravasations, local congestions from injuries, etc., goes to show that it has a decided action on the capillary vessels. Again, its popularity in flatulent colic, indigestion, and diarrhœa, would go to show that it has a specific curative action in such cases. In Dr. Burt's provings it caused severe griping in the hypogastrium, with flatulence and diarrhœa, bloody stools, also nausea and faint feelings. Decided bilious symptoms were evolved in his provings, and such irritation of the lower bowels as would lead to hæmorrhoids and congestion of the pelvic viscera in general.

We see by this that it is capable of originating irritations which would lead to all the conditions of the bowels and pelvic viscera which it is said to have cured.

There is no doubt of its action on the urinary organs. It has cured disorders supposed to be due to *gravel, catarrh of the bladder*, and *dropsy* from deficient action of the kidneys.

It certainly acts on the organs of generation. Reports show its curative powers in *prolapsus uteri*, in *dysmenorrhœa*, in *varicocele, pruritus, amenorrhœa, menorrhagia, vicarious menstruation*, and *threatened abortion*.

But what is the keynote for its use in all these affections? The pathological condition present I believe is *passive congestion*, and

the keynote is the *presence of hæmorrhoids.* In other words, nearly all the troubles cured by Collinsonia, having their location below the diaphragm, are either dependent on the same conditions that caused the presence of hæmorrhoids, or were due to the irritating effect of the piles on contiguous organs.

I also believe that these conditions are due to the secondary effects of the drug; and that the colic, diarrhœa, bilious symptoms, nausea, etc., noted by Burt, are primary symptoms. For the former, appreciable doses have been found most efficacious; for the latter, higher attenuations have been most effectual.

Let it be noted that a study of the testimony relative to its cures in various disorders goes to show that *all the cases were associated with hæmorrhoids.* This is especially true of the constipation, uterine disorders, urinary difficulties, and even affections of the male genital organs.

The Collinsonia removes the congested state of the hæmorrhoidal vessels, and the disorders of contiguous organs and tissues disappear.

But how are we to account for its cures of affections of the body above the diaphragm? It has cured *headache, hæmoptysis,* and *irritable heart.*

The headache we might safely assert was due to biliousness, or was that variety which precedes piles, or attends the suppression of their bleeding.

We might suppose its specific power over the bloodvessels of the lungs, and on the heart, was due to its power of contracting them, or giving tone to their muscular fibre. But there is one fact recorded by observers which may throw some light on the subject, namely: The hæmoptysis supervened upon suppression of a hæmorrhoidal flux, and the piles returned after the hæmoptysis ceased!

In Dr. Liebold's case, however, the patient supposed he never had piles, but he was very constipated, and a bleeding from the rectum preceded the hæmoptysis. The sputa was "very tough, dark coagulæ of blood, as large as a bean, enveloped in a viscid phlegm."

Some cases of cardiac irritability are distinctly traceable to suppressed hæmorrhoidal bleeding, or the non-appearance of ha-

bitual piles. This the Collinsonia has cured, but it also has cured irritable heart, when the general health of the patient appeared good.

It is somewhat singular that Burt experienced no heart-symptoms. Perhaps their absence was because he was not expecting them. I suspect that many of the symptoms of our Materia Medica have their origin in the power of expectation. It may have been because the heart-symptoms are always sequential,—*i. e.*, must be preceded for some time by irritation or congestion of other organs.

I believe it acts on the heart in two ways—(1) by removing obstructions or irritations in the liver, portal system, or kidneys; (2) by increasing its muscular tonicity, in the same manner that it increases the tone of the muscular fibres of the stomach, intestines and bloodvessels.

Varicosis, as a general disorder, may come under the curative sphere of Collinsonia. I would advise its use in such condition, when Hamamelis, Pulsatilla, and Sulphur fail. Its curative effects would seem to prove its affinity for varicose conditions. Piles are a kind of varicosis; so is varicocele. *Pruritus of the vulva* in pregnant women has been cured by it. Now *pruritus* is often due to a varicose condition. Dr. Cushing's case was one of varicosis evidently, for he makes no mention of aphthæ, and he says the parts (vulva, etc.) were "dark red (purple?) and protruding." Pruritus often precedes varicose veins of the leg, and the varicose ulcer.

I suspect it affects the venous side of the heart, in preference. But I do not think its exact field in cardiac disease is yet definable.

Dr. Fenner cures with Collinsonia cases which he calls "*irritation of the cardiac nerves*, a functional disorder of the heart, with rapid, regular or irregular beating; pulse 130 to 140 per minute; the slightest motion or excitement aggravates the symptoms; periodical spells of faintness and oppression; attacks of syncope, with fulness of the chest, dyspnœa, and great prostration."

It is said to be useful in *valvular diseases*, and some cases illustrating its value in disease of the mitral valve have been published. It allays the distressing *cough attending some heart difficulties.*

And with some physicians it is esteemed very highly for all *hard, shaking coughs*, with or without expectoration.

It is in *hæmorrhoids* and their consequences or complications, however, that this drug has achieved its greatest triumphs. Drs. Carroll, Fowler, Holcombe, Lord, Barnes, Franklin, and Hughes all agree upon its great value in *obstinate and chronic piles, bleeding* or not, but *always* attended by *constipation.*

I am inclined to believe that its curative powers in disorders of the organs of generation of women (and men) depend almost wholly on the disorders of the rectum which it causes. Dr. Storer, of Boston, believes that a large proportion of uterine diseases depend on rectal disorders. Dr. Storer is doubtless correct in his estimate. In every case of uterine disorder, you should carefully inquire into the condition of the intestines, the bowels, and rectum. You will often find the cause therein, and you will very often find Collinsonia a remedy which will prove far more useful than the ordinary medicines prescribed in such cases. What Sepia is to chronic diseases, Collinsonia is to the acute.

CUCURBITA PEPO SEMEN.

The seeds of the ordinary pumpkin have long had a reputation as a demulcent diuretic, for the relief of strangury and other urinary difficulties. The same may be said of the seeds of the watermelon, musk-melon, cucumber, and all that family.

But the pumpkin seed has a value which you would hardly expect from a seed so mild and edible. In fact, it is doubtful if they possess any actual medicinal properties as we understand it; for the seeds may be eaten in any quantity sufficient to satisfy hunger, with no other result than profuse urination.

The property I refer to is the power of the pumpkin seed to *aid* in the expulsion of tape-worms (tæniæ). I use the word to *aid* for the reason that we are not certain that the effects of the seed alone would expel the worms or even poison them. It may do nothing more than gorge them to such repletion that they lose their power of adhesion to the intestine. In apparent contradiction to this supposition is the recorded assertion that the *oil* expressed

from the seeds, as well as an *infusion* of the seeds, has destroyed tæniæ.

Various methods of administration have been advised. One authority advises one ounce of the peeled seeds to be taken on an empty stomach, followed in six hours by a dose of Castor oil. Another directs two ounces to be beaten up with sugar into an electuary, or with water into an emulsion, and taken fasting in the morning, the patient having dieted the previous day, and a brisk purge taken some hours after.

My method, and I have expelled a great many with it, is to direct the patient to eat but little of the lightest food all day, take no supper, and on going to bed eat one ounce of the peeled seeds bruised, with milk or cream. In the morning, on waking, take a tablespoonful of Castor oil mixed with half a teaspoonful of pure Sulphuric ether. No breakfast is to be eaten—only a cup of tea or coffee. In two or three hours the oil will operate, expelling the worm.

I have seen them expelled without the use of the oil and Ether, especially in children; but in adults I think they had better be taken.

The Ether undoubtedly plays an important part in the expulsion of the parasite, for it has lately been advised alone, and is said to succeed in expelling tapeworm, in doses of 30 to 60 drops, taken fasting. It is supposed to stupefy the worm, during which condition it drops from its attachment, and is carried along the intestines until it is expelled.

The *oil of pumpkin seed* is recommended to be taken in doses of half an ounce, fasting, followed in six hours by another half ounce, mixed with an ounce of Castor oil.

Half the above quantity will be a sufficient dose in the case of children under twelve years.

In this connection I will mention some other remedies for tapeworm which you may be obliged to resort to, for, although the pumpkin seed is the safest and is generally efficient, there are cases where, owing to some idiosyncrasy in the worm (not the patient), the seeds fail to destroy it.

The next best agent is undoubtedly the *Oleo-resin of the male fern* (Filix mas). The patient should live upon bread and a little

milk for one day, and the following morning take a full dose of 30 to 60 drops, fasting, repeating it in three hours. At noon the patient may eat food, and in the evening a cathartic is to be taken. I would advise the Castor oil and Ether as above. I have somewhere seen, in homœopathic works on practice, a recommendation to give the attenuations of Filix mas. Such a practice is simply absurd.

Kousso (Brayera) has a high reputation as being the most efficient remedy against tape-worm. Baehr advises it in preference to any remedy. It causes less pain and inconvenience than any other agent except the pumpkin seed. The powdered flowers in doses of half an ounce, or twenty to forty grains of the resin Koussin, is prescribed to be taken suspended in water, in the morning. No purgative is necessary, as it causes loose watery passages with but little pain and nausea. The worm is usually expelled dead in the last passages.

Granatum (the bark of the pomegranate), has been used, but it is harsh and unpleasant.

Turpentine is unsafe and even dangerous.

Kameela is sometimes efficient, but inferior in efficacy to the first named.

The rules laid down by Hahnemann, Hartman, Hering, and others, appear to me, as they do to Baehr, to be superfluous. The tapeworm does not depend for its existence on any dyscrasia of the system, but it is introduced from without with the food, and must be expelled or destroyed, just as we should destroy a snake or any other reptile living in the stomach or intestines.

CYANURET OF MERCURY.

This drug is almost as poisonous as the Cyanide of potassium. It may not kill as suddenly, but the sufferings of the victim are a hundred times more intense.

In cases of poisoning by this agent we have all the symptoms of Hydrocyanic acid, to which are added the terrible effects of Corrosive mercury. Worse than this, even, we have a picture of the most *malignant* forms of *diphtheria.* The following are its characteristic symptoms:

"The *tongue* is pale, with a yellowish streak on the base; swollen, with red edges.

"The *throat* looks rough; *pharynx* red and injected.

"*Gums* swollen, and covered with a white adherent layer, under which is found a violet border.

"A white opaline layer forms on the *columns* of the *velum palati* and *tonsils;* on the inside of the right cheek was a round ulcer with a grayish base, the borders as if cut out and surrounded with great redness.

"The *lips, tongue,* and inside of the *cheeks* dotted by ulcerations, and covered by a grayish-white coating.

"A *pseudo-membranous* formation extends all over the fauces and down the throat.

"Inflammation of the whole buccal cavity, with salivation, fetid breath, and great pain on swallowing."

We have here a picture of malignant diphtheria *accompanied by ulceration.* This pathological condition, coupled with the *suddenness* and *severity* of the attack, fully indicate this drug above all others.

The concomitant symptoms are equally important as an indication, namely: *epistaxis, cerebral congestion, pupils contracted,* syncope, loss of consciousness, vomiting, diarrhœa, diphtheritic formations on other portions of the mucous membrane, and even the skin.

The *diphtheritic process* attacks the *kidneys,* causing one of the worst varieties of *Bright's disease,* and it may prove to be one of our best remedies in the *croupous form of nephritis,* and in *albuminuria* following diphtheria and scarlatina.

I once saw an epidemic of *malignant scarlatina,* which presented nearly all the symptoms and conditions caused by this drug. It had not been introduced into our Materia Medica at that time, or I might have saved some cases.

Malignant dysentery is closely imitated by the symptoms of the Cyanuret of mercury. It is attended by great prostration, putrid bloody stools, diphtheritic patches at the anus, ulceration, gangrene, and finally collapse and death.

It causes *phlebitis* and *varicosis,* and ought to be specific in the worst cases, as well as *varicose ulcers.*

Physicians have reported cases cured by Mercury cyanide of what they termed *malignant membranous croup*, but it is evident that the croupous symptoms were due to an extension of the deposit or exudation to the air-passages.

I would suggest its possible usefulness in those cases of *sudden paralysis*, or *sudden heart failure*, which occurs after attacks of diphtheria, even when it has been supposed to be non-malignant in its character.

Among other remedies for diphtheria, none resemble it in intensity of action; but those which approach it nearest are Kali caustic, Kali bich., and Lachesis.

The 6th dilution or trituration is as low as it can be safely used for children; the 3d cent. in adults. The use of this medicine alone, or in connection with a gargle or spray of *Chloride of lime* (Liq. calcis chlor., ℥j; Aqua, ℥iv), is the best treatment now known for this terrible disease.

CYANIDE OF POTASSIUM.

This drug, sometimes called the Cyanuret of potassium, is one of the most violent poisons known. Its action is very similar to Hydrocyanic acid. Its analogues are Prunus, Lycopus, Laurocerasus, Digitalis, and Amygdala. Three grains are sufficient to destroy life in a human adult.

Allopathic physicians are very cautious how they use this medicine. Their utter disbelief in the value of inappreciable doses unfits them for the selection and administration of such agents.

The poisonous effects of this salt do not differ essentially from the *acid*. It has been proved by numerous experiments that the latter "acts through the *blood*, directly upon the cerebral and spinal centres, and indirectly upon the lungs and heart, probably first suspending respiration through the want of the proper nervous influence to the pulmonary function; and secondly, arresting the heart's action through the want of blood from the lungs. Death, therefore, takes place through asphyxia. Hence the general venous congestion observed after death, affecting the brain, lungs, etc. The insensibility, however, is the antecedent of the asphyxia, and depends not upon the want of blood in the brain, but upon the immediate paralyzing influence of the poison."

I do not see why it may not paralyze the *heart*, directly, as well as the brain; but some facts seem to point to the contrary, for it is asserted that "the heart continues to beat after respiration has ceased."

Prescribed according to the law of *similia*, it can be used in all cases where the provings of the *acid* show that it is indicated, for its union with Potassium does not effect any change in that respect, although we may get *additional* symptoms belonging to the alkali.

The keynote, or characteristic primary condition or symptom indicating the Cyanide is the *suddenness* and *severity of the attacks*.

A woman who took 12 grains fell as if struck by lightning, and died in 40 minutes. In fatal poisoning by the Hydrocyanic acid, death has occurred in less than a minute.

I believe that you will find it useful in those rare cases of *cerebro-spinal congestion* which have been known to throw the victim into fatal or dangerous coma in less than half an hour; or in cases of *apoplexy* from venous congestion, striking the patient down with equal suddenness.

We find recorded among its symptoms "*severe* sudden pain in the head, vertigo, and sensation of *weight* and great pain in the *back* of the head."

It has cured some very intense *periodic neuralgias*, viz.:

(1.) Torturing neuralgic headache in orbital and supramaxillary region; the pains recurring daily at the same hour, with much flushing of that side of the face.

(2.) Agonizing attacks of neuralgic pains between the temporal region, ciliary arch, and maxillary, with screams and apparent loss of sensibility, as if struck with apoplexy; pulse 84, face flushed.

(3.) Severe neuralgic pains in temporal region and left upper jaw, daily at 4 P.M., increasing till 10 A.M., and ceasing at 4 P.M.; in the interval, anorexia, fever, headache, etc. Similar cases have been cured by Arsenic, Quinine, Atropia, Chelidonium, and Nux vomica, but the diagnostic difference in favor of the Cyanide is the *suddenness* and *severity* of the paroxysm.

The dose in such cases (or in any case) should not exceed the 1st centesimal trituration, in a *one-grain* dose, repeated every hour

or two in the apyrexia, and every fifteen minutes during the paroxysm. Allopathists direct the maximum dose to be one-eighth of a grain. The $\frac{1}{25}$ or $\frac{1}{50}$ would be safe for an adult. A dilution containing $\frac{1}{100}$ grain to a drop makes an eligible preparation, as the 2° or 3° could be used for children.

It has been used *externally* for the relief of headaches. Trousseau directs a solution not stronger than two to four grains to an ounce of water, but I cannot recommend it, except as a last resort in the most severe cases.

It seems indicated in *spasmodic affections of the œsophagus*, followed by vomiting from paralysis of that tube, as witness the symptom:

"Nausea, with sense of choking when trying to swallow fluids, followed by copious vomiting."

I think it will prove valuable in *gastritis* of very sudden onset and severe character.

It corresponds to *threatened asphyxia from venous congestion of the lungs;* also, to *whooping-cough*, when asphyxia occurs during the severe paroxysms. You may find it useful in some cases of *nightly cough* of a paroxysmal character, even when caused by cardiac disease.

I have prescribed it a few times in *functional disorder of the heart*, with slow, feeble, irregular pulse, alternating with *palpitations*. Even if the cardiac disease is organic, and the nervous element largely predominates, it will be found useful. A tendency to venous congestion, and a bluish color of the lips and skin, are specific indications.

CYPRIPEDIUM.

There are eight species of *Lady's Slipper* indigenous to this country. It has a singular-looking flower, resembling an Indian moccasin or a Chinese shoe, whence its name. It is also commonly called "Valerian" and "nerve root," both of which names are given to the Scutellaria. The Cypripedium pubescens (large yellow) has been selected as the officinal species, but as the roots of all are collected and used I do not see how we can discriminate. They all contain in common a peculiar "nervine" property. Raf-

inesque considered this species to be the strongest, next the *Cypripedium acaule*, and last, the *Cypripedium spectabile* and *candidum*. King says the two latter possess more narcotic power than the others, especially when found in dark swamps.

The medicinal action of the various species differs in quantity rather than quality.

In domestic and eclectic practice this root is held in the highest esteem. I have been surprised, however, to find that our school have almost altogether neglected it in favor of Scutellaria, although the testimony is about equal relating to their power over the nervous system.

When an infusion in large quantities, or a strong extract is taken by a healthy person, it causes at first a feeling of exhilaration of the mental and nervous system. Afterwards comes a sense of calmness and quiet, followed, if larger doses are taken, by a sense of mental fatigue, an oppression and heaviness of mind, and a disposition to drowsiness.

It is resorted to by women whose nervous systems have been shattered by long and wearing illnesses and excessive green-tea and coffee drinking. It removes abnormal irritability, but if it is used to excess the secondary effect is to increase the very irritability and weakness which it palliated. This is the case, however, with all its analogues, namely, Teas, Coffees, Valerian, Scullcap, Paullinia, Coca, Chloral, and the Bromides. It is for conditions similar to their secondary effects that these medicines are usually prescribed.

The sphere of remedial action possessed by the Cypripedium is not wide. It acts upon the cerebro-spinal system, upon the gray nerve-tissue, and is useful for the effects of *overmental exertion* or *reflex nervous excitement*.

You will probably find it useful in *hysteria, chorea, nervous headache, delirium tremens, hypochondriasis, neuralgia*, and that peculiar condition for which there is no better name than "*fidgetiness*." For all these conditions, however, it never can rise above that of a palliative, unless the case be very recent. For serious cases some remedy whose action is deeper is usually required.

There are some affections, however, in which it appears to act more permanently.

It is invaluable in that well-known condition to which children are subject, when, from some gastric or intestinal irritation, the reflex excitability of the cerebro-spinal centres is aroused, the *brain becomes irritated, and convulsions impend.* Here it rivals the Bromides, Chloral, Scutellaria, and Cuprum acet., and is superior to the routine Belladonna, Hyoscyamus, and Chamomilla. In such cases a few drops of the mother tincture, or 1ˣ, frequently repeated, is attended by the best results.

Sleeplessness, when depending on functional disorder of the brain and nervous system, or mental excitement, is often promptly removed by similar doses. This sleeplessness of Cypripedium is not an unpleasant condition; there is a desire to talk, a crowding of pleasant ideas, with a restlessness of body, a twitching of the limbs, etc. It is more adapted to the delicate organizations of children and feeble women than to men.

I have found it useful in the *mental depression* and irritability consequent on venereal excesses or spermatorrhœa. It is equally useful when the mental despondency is the result of brooding over an imaginary spermatorrhœa, or the imagined ill effects of nocturnal emissions, a very common condition caused by the reading of those foolish books published by quacks and charlatans.

In *typhomania,* and the *jactitations,* tremors, restlessness, etc., of patients with low fever, its effects are very pleasant, and renders such patients quiet and comfortable, without interfering with the action of the proper specifics.

There is a condition of *cerebral hyperœsthesia,* occurring in young children, which is often dangerous in its consequences. It results from teething or mental stimulation. It is too much the habit of doting parents to overstimulate the tender brains of infants by attempts at teaching them beyond their normal capacities. The children become morbidly excitable. They become precociously bright, sleep but little, are inclined to laugh and play at night, crave light and noise; and parents, not knowing the danger impending, favor instead of suppressing this dangerous condition. I have often seen this functional irritability end in convulsions. It often leads to congestion, and fatal meningitis then closes the scene.

Now, Cypripedium will aid you in removing these premonitory

brain-symptoms, if you can oblige the attendants to place the child where it can have quiet sleep, and a dim light; but this remedy is of no value after the irritation has become fixed, for it is not homœopathic to congestion or inflammation of the brain or spinal cord.

In relation to the dose and best preparation my advice is to use, for very young children, the 1ˣ or 2ˣ *aqueous* dilutions, to avoid the alcoholic stimulation, or *dried* pellets of the alcoholic dilutions, or an infusion of ten grains of the root to four ounces of *hot* water. This preparation may be given in teaspoonful doses. For adults, tablespoonful doses of an infusion of one drachm of the root to ℥iv of hot water, or ten drops of the mother tincture.

It is said to have caused symptoms of the skin similar to Rhus poisoning. (See Vol. I.)

COTYLEDON.

I found the provings of this common English plant (Navelwort) in the "British Journal of Homœopathy." It seems to affect the mental sphere like Ignatia, causing alternate states of exhilaration and depression. It also resembles Asafœtida. I am surprised that so many important symptoms were caused by such an insignificant plant. I more than suspect the imagination of the provers called them up, like the phantasmagoria which float through Houatt's notorious pathogeneses.

The only *clinical observation* I have been able to find relating to Cotyledon is one quoted by Lilienthal, from C. Müller, to the effect that he had found it useful in *eczema capitis* (tinea), but in what doses he does not say.

CUNDURANGO.

This medicine is prepared from the bark of a climbing plant found in Ecuador, South America. It is called the *Condor-plant* by the natives, and it is from them that the knowledge of its supposed virtues were first obtained.

It was introduced into practice and notoriety by a Dr. Bliss, of Washington city, but the manner of its introduction was so

suspiciously unprofessional, and smacked so much of quackery, that Dr. Bliss was expelled from the allopathic society to which he belonged. The testimony relative to its value is singularly at variance.

Dr. Bliss, and a few others, claim to have cured many cancers by its use. Other physicians claim to have tested it in private and hospital practice, and found it worthless. The British Hospital physicians report against its value.

Dr. Andrews, of Chicago, in a communication to the Academy of Science, stated that he had corresponded with many of the most eminent physicians of South America relative to Cundurango, and while they denied its curative powers over cancer and syphilis, they asserted its usefulness in "*old, obstinate, foul ulcers.*"

Several homœopathic physicians in this country have reported favorably of its value in "*foul* and *obstinate ulcers.*" Dr. Clotar Müller, of Germany, reports that he has used it in over twenty cases, "some were real carcinoma, others benign (purely scrofulous) glandular swellings and ulcerations. In the latter it showed no action whatever. It also failed to act in scirrhous indurations. The size, hardness, and lancinating pains remained unaltered." He decrees that "favorable action may be expected in open cancer," but the cases he cites do not prove its value in cancer, for he fails to show that his cases were cancerous. I give his cases as he reports them.

(1.) Carcinoma of the lip, an unclean and sinuous ulcer about the size of a dime, with surrounding hardness and swelling, burning pains, lip everted outward, emaciation. Five drops of 1st dil., morning and evening. In ten days the ulcer looked better and the surrounding hardness was reduced to a minimum.

(2.) On the right of thorax and around the nipple several tumors, of which two suppurated and formed sinuous, ugly-looking, foul-smelling ulcers, with raised edges. Cured in two months.

(3.) An ulcer seated on false ribs, of the size of the hand, beginning years ago. It looked carcinomatous with its high uneven edges, its deep, small islets of half-destroyed cellular tissue and muscular fibres at the base, and with its ichorous, acrid secretion; the pains were severe. After taking Cundurango the ulcer had decreased to half its size.

I do not consider these cases as brilliant illustrations of *cures* by any means, nor do I believe the ulcers were cancerous. They were simply *old, foul-smelling, ichorous ulcers*, just such ulcers as South American physicians found it useful in, and the sphere of Cundurango evidently includes just such ulcers appearing anywhere on or in the body.

In the "North American Journal of Homœopathy," May, 1874, is reported a case, by Professor N. Friedreich, as "*carcinoma ventriculi*, with co-affections of the epigastric and supraclavicular lymphatic glands." This case was so nearly cured by Cundurango in three months that the patient was discharged. The dose was 3iv of the bark to half a pint of water; a tablespoonful twice a day.

I have given it in several cases of uterine cancer, but without any good results.

From the "British Journal of Homœopathy," January, 1875, I quote the following, translated from a paper by H. Goullon, Jr., in Hirschell's "Zeitschrift," No. 16:

Dr. Obolinski, surgeon to the St. Lazarus Hospital, Cracow, experimented with the *Cundurango* in several cases with the following result:

CASE I.—Patient is suffering from an epithelial cancroid of the right foot. He gets fifteen grains pro die, in the form of decoction, for three weeks. The remedy was likewise applied locally.

Result.—No amelioration; the pains are getting intolerable. Dr. Obolinski performs amputatio cruris.

CASE II.—Patient is suffering from an epithelial cancer of the left temporal region, of the size of the palm of the hand. Medication as in Case I, but during six weeks.

Result.—The whole ulcerative surface covers itself, in the fourth week, with healthy granulations, and this led Dr. Obolinski to perform a heteroplastic operation, after the manner of Reverdin, and that, too, with success. However, no sooner had the transplanted bits begun to show signs of activity than the cancer began afresh, and destroyed both granulations and the transplanted portions of skin. Here the whole of the epithelioma was extirpated right down to the bone, and the place was brought to heal for good.—(Goullon, Jr.).

But when, not long ago, Professor Friedreich published a case of cancer of the stomach cured by the bark of Cundurango, and thereby called attention to the fact that many of the experimenters had got negative results because they had had spurious or bad preparations, Obolinski began to experiment again, and this time made use of true American Cundurango bark, prepared from the sources named by Professor Friedreich. He had two cases in his private practice, an

octogenarian woman, with a flat epithelial cancer (ulcus rodens), of about the size of a farthing, on her lower eyelid; and a woman, æt. fifty, with a flat epithelial cancer, about the size of a bean, on the left side of the nose, and which had been repeatedly cauterized with *Kali causticum*, but kept on coming again. To these two he exhibited the remedy. He gave to both patients, daily, two, and, later on, three tablespoonfuls of medicine, and charpie impregnated therewith was laid on the sores. Both went their way to their homes with the order to persevere in this manner for a couple of weeks, or even months, and when Dr. Obolinski saw them again, six weeks thereafter, he was very greatly astonished to find both sores perfectly healed.

These cures have no small clinical interest for us homœopaths. First of all, they seem to confirm the opinion expressed already, in 1872, by Cl. Müller, in his clever essay on this subject, viz., that the newly imported drug is no infallible remedy against all sorts of growths called cancer, but rather curative of a definite form of such growths. "It will be seen," said he, "*Cundurango* does *not* act curatively in cases of tumors and scirrhous indurations, but rather in cases of open carcinomata and cancerous sores; in other words, it happens, as with other discoveries, that the discoverer himself thinks his little babe a kind of Messiah, who shall work such wonders and signs as neither Creator nor creation intended."

Then, when the public finds itself disappointed by the numerous failings, there follows such an odious and blind reaction, that the really good part of the discovery is no longer seen, and all who desire to get better acquainted with the thing are repelled by the giant, Prejudice. Is not homœopathy itself a sad example of all of this? Of further interest in these cases of Obolinski is the question of the dose. Cl. Müller himself soon perceived that but little was to be expected here from light, infinitesimal doses. He gave, night and morning, five drops of the first dilution.

The external treatment of the sores, carried out at the same time with the same remedy, is probably of very decided advantage. Müller's case was cured with Cundurango[1], internally alone.

We think that we are also justified in concluding, from the observations of the Cracovian surgeon, that where Cundurango should prove of no avail, a stronger and not a weaker dose would be called for. It is not with Cundurango as with Silicea and Lycopodium.

COSMOLINE.

This remedy is used quite extensively by the homœopathic school as an external application. It is a purified, concentrated petroleum, or the substance which remains after all the ether, coloring matter, impurities, etc., have been removed. It is a white, oleaginous, and odorless substance, having an absolute non-affinity for oxygen, and evaporating only above 400° Fahr.

Dr. McFarlan, of Philadelphia, asserts that the provings of the lower triturations develop symptoms which have some simi-

larity to those of Pulsatilla, Urtica urens, Petroleum, Carbolic acid, and Rhus.

The workmen engaged in its manufacture suffer from the same pathogenetic symptoms. They have also the following skin symptoms:

"Great apparent dryness of the skin and itchiness everywhere, with a constant disposition to scratch. The skin is often dry and scurfy, in irregular patches or blotches, which itch a good deal. On scratching, the skin raises in welts or blotches."

I am not aware that it has been used much as an internal remedy, but it has become quite a favorite external application, not only in our own but all schools, and extends largely into domestic practice. It is manufactured on a large scale, and is sold by all druggists in the United States.

Its effects, when applied to the skin in cases of *urticaria, eczema, psoriasis, herpes*, and in nearly all cutaneous diseases in which the skin is *dry and irritable*, is certainly very soothing and often curative.

It has been combined with various substances, forming compound cerates. In fact it is largely used as a base for making cerates with Arnica, Calendula, Carbolic acid, Hamamelis, Hydrastis, etc.

I find, however, that while these cerates are sufficiently stable in cool weather, they soften and assume an oily consistence when the mercury goes above 70° Fahr. In order to make the Cosmoline cerates sufficiently stiff to be used in summer, it is necessary to combine it with Cocoa butter, Mutton tallow, or Spermaceti.

My usual formulæ for these cerates are on the decimal scale, namely: One drachm of the tincture selected to one ounce of Cosmoline. Or, gr. 60 of crystals of Carbolic acid to one ounce of Cosmoline (1ˣ). This is too strong for all except old, torpid skin diseases. For a sensitive skin, one drachm of this 1ˣ to ℥j of Cosmoline. This is called Carbolated cosmoline. The names, Arnicated cosmoline, Hydrastic cosmoline, Calendula cosmoline, may be used to designate these preparations.

Many physicians use the pure Cosmoline for *burns, scalds, blisters, cuts, bruises, sprains*, and even *acute and chronic rheumatic affections*, with alleged benefit.

There can be no objection to its use in our practice. On the contrary a positive benefit may ensue, by preventing the use of those noxious, disagreeable, and often injurious ointments which are sold everywhere. Patients will use *something*, and if the physician does not recommend anything they will resort to the nostrum most convenient, or one that is most largely advertised.

CLEMATIS VIRGINICA.

This is an indigenous species, not differing essentially from the European *Clematis erecta*. The latter is a very valuable remedy, and not sufficiently appreciated by our school. Belonging to the same family as the Pulsatilla, it resembles it very closely in many respects. It has the same, if not a greater action on the organs of generation—uterus and ovaries, testicles and spermatic cords—and upon the skin and glandular system. Its action on the nervous system has been overlooked. In this respect it somewhat resembles its relative, Cimicifuga.

Dr. Scudder (eclectic) first called attention to the indigenous Clematis. He says it is a "powerful nervine," useful in controlling erethism of the nervous system in women.

Several years ago I procured the leaves and made a tincture, which I have prescribed on many occasions in that kind of *nervousness*, half physical, half psychical, which affects some women who have been worried by care and illness combined. In doses of a few drops several times a day it acts admirably.

I have cured with it several cases of *acute pustular skin diseases*, and a few cases of *orchitis* and *ovaritis*.

No indigenous remedy is more deserving a thorough proving. The time will come when our own (indigenous) plants will supersede the foreign, for they possess analogous if not identical virtues.

COMOCLADIA.

This poisonous shrub, known to the natives of the West Indies as *Guao*, is very similar in its effects to the *Anacardium* of the East Indies and the *Rhus* of the United States.

So virulent is its poison, that sleeping beneath its shade often

causes fatal illness, especially if the sun is shining. It has been observed that the poisonous influence of the Rhus is felt more intensely in hot, sunny weather.

Like the Anacardium, the Guao causes not only *vesicular eruptions*, but *malignant pustules* and *ulcers*. The ulcers are deep, with hard edges; they discharge a thick, purulent, yellowish-green matter, having a very peculiar fetid smell, the parts becoming in appearance like a piece of raw, decayed meat, while the surrounding skin is covered with small shining scales.

This gives a very good picture of the worst forms of *malignant erysipelas*, of a greater severity than that for which Rhus is indicated, and for which we have usually used Lachesis and Arsenicum.

It has been used in *leprosy* by the Spanish homœopathic physicians, and with considerable success.

In *erysipelatous inflammation* of the tissues in and around the *eye*, it will be found superior to the ordinary remedies.

Dr. Navarro cured a *sloughing ulcer of the right breast;* also an "*indolent ulcer*" on the lower third of the right leg near the external malleolus, of irregular shape and hard edges; the ulcer was deep and discharged a sanious and fetid pus; it had lasted six years. (Cured in four weeks by the 6th dil.) The same physician reports a case of inflammation of the left leg and foot with violent fever; the swelling increased enormously; when the pain subsided the skin became white and covered with shining scales; cracked and discharged a sanious fluid. This case was cured with the 6th.

It caused the same *rheumatic pains* and *swellings*, aggravated by rest, relieved by continued movement, as does Rhus. I have rarely been able to procure the drug, and while we have the Rhus and Anacardium we hardly need it. It corresponds more closely to the diseases of the tropics than those of the temperate zone.

CORNUS FLORIDA.

This shrub or small tree is the true *dogwood*, although where it got this name I never knew. It presents a very beautiful appearance in the early spring, when, before the leaves appear, the tree

is white with its snowy and showy blossoms. The *sepals*, however, and not the *petals*, are the most showy portion of the flower. The bark is intensely bitter, and among the common people is used largely as a tonic, and as a substitute for Quinine in ague. An active principle, called *Cornin*, was at one time sold, but it is unreliable. In large doses Cornus causes a fulness in the head, with some pain, quick pulse, and gastric irritation. I have used the tincture in *obstinate intermittents* where Quinine had been abused, and found that when the following group of symptoms were present it usually cured:

The ague paroxysm is preceded for days by sleepiness, sluggish flow of ideas, headache of a dull, heavy character. The paroxysms are attended by nausea, vomiting, and sometimes watery or bilious diarrhœa. In the *chill* there is cold, clammy skin; in the *fever* violent headache, with throbbing, stupor, confusion of intellect, and vomiting.

The tincture should be given in doses of five or ten drops, every two hours, in the apyrexia. The 2d or 3d dil. every hour during the paroxysm.

In some old cases of dyspepsia, when the chief symptom is *acid pyrosis*, this remedy, like Columbo, Chelone, China, and Nux, will often effect very satisfactory cures.

CORNUS CIRCINATA.

This species of Cornus is a smaller shrub than the flowering dogwood. It has a small but pretty blossom, in large flat or depressed cymes; a small, light-blue fruit, nearly the size of a currant. The bark on the young branches is a bright green, giving the name *Green osier* to this species.

It is very popular in the country as a remedy for *aphthous* and *ulcerated conditions* of mucous membranes. It certainly has some marked specific virtues in such conditions even when chronic, for I have known it to cure chronic ulcerations of the mouth and throat, recurring occasionally for many years. It acts best when used as a lotion; and also internally in appreciable doses of the tincture or infusion of the recent bark.

It has also been used in *agues* of nearly the same character as

described for Cornus Florida. The provings made and published by Dr. Marcy give us similar symptoms. It is evidently an analogue of China, Hydrastis, Eupat. perf., Chelone, etc.

The principal disorders in which it has been successfully used are *bilious headaches, jaundice, aphthous stomatitis,* and *hepatic* derangements. Dr. Marcy and several others value it very highly in *bilious diarrhœa* and *dysentery.* The symptoms are similar to those of Merc. cor., Aloes, and Nux, for which it may be judiciously substituted in some cases occurring in connection with malarial conditions, and in hot weather.

CORYDALIS.

There are some medicines in the vegetable kingdom which closely resemble in remedial action those from the mineral.

No chemist can explain this resemblance by any chemical analysis, for the analogy lies deeper than any manipulation in the laboratory can discover. It may be that the ultimate atoms of Phytolacca and Mercurius, Iodide of potassa and Stillingia, Aurum and Corydalis, are similar, and that this ultimate similarity gives similarity of action and curative potentiality.

A glance at the clinical history of Corydalis will show some striking resemblances in the results obtained from its use, and the known curative action of those medicines so renowned as specifics against the syphilitic dyscrasia.

No provings of this agent have been made, and we have to rely mainly on reports of cures in eclectic literature. My experience, although limited, because I treat but few cases of syphilis, has been favorable.

I remember two cases of *syphilitic nodes* on the tibia, with nocturnal pains, which had been treated for nearly a year with massive doses of Iodide of potassa without benefit. Under the use of the Tincture of corydalis, in ten-drop doses, four times a day, the swellings slowly but permanently disappeared.

We have trustworthy testimony that it has cured *syphilitic nodes of the skull,* with falling off of the hair; also, *syphilitic* and *scrofulous eruptions on the scalp.*

It has also cured *syphilitic* and *non-syphilitic ulcerations of the*

mouth and fauces. I think it will be found to be better adapted to *secondary syphilis* than primary. Whether it is useful in the so-called tertiary forms, or the mercurial cachexia, which some believe to be identical with the latter, future observation must determine.

I would not have you think I confine its use to syphilitic diseases alone. It may prove just as useful in the *scrofulous* (strumous) *dyscrasia* and in *obstinate cutaneous diseases.*

It would be worth while to try it in *congenital syphilis.* You may find it useful in the *cachexia caused by intermittents,* when you find enlargement of the spleen and liver.

Its use in massive doses has caused, according to eclectic physicians, the following conditions: "A derangement of the stomach, attended with profuse morbid secretion of mucus, there being always a coated tongue, with fetor of the breath, and loss of appetite and digestion." It is, therefore, indicated in *gastric catarrh,* and is, in this respect, an analogue of Hydrastis.

DIGITALIN.

I introduce this drug among the new remedies for the same reason that I introduce Atropia and Ergotin, namely, that it is not mentioned in our textbooks on Materia Medica, and that there are instances where the active principles of plants are substituted for the original drug with great benefit.

Digitalin is the active principle or alkaloid of the plant Digitalis, and possesses a large proportion of its pathogenetic effects. I assume the same ground, in treating of this substance, that I did in treating of Atropia—that while an alkaloid may represent the principal effects of the plant, it cannot represent all the symptomatic effects and nicer shades of action.

Digitalin, from the very numerous experiments recorded, made by the most eminent physiologists, seems to affect the heart in a manner nearly if not altogether identical with Digitalis.

I have written a good deal concerning the action of Digitalis, and my papers have been severely criticized by physicians so bigoted that they would not see the logical deductions which must arise in consequence of new discoveries in the action of

medicines. But time has confirmed my views and silenced my critics, and I am content.

I will state, in as brief terms as possible, the known and undisputed action of Digitalin on the heart:

(1.) Digitalin produces a condition of excitement in the controlling centres in the heart, and hence the slowing of the pulse with increased power of the heart's impulse.

(2.) It has a peculiar specific influence on the heart's muscle, whose contractions are strengthened in the first stage, becoming irregular in the second, and in the third a peculiar rigidity is induced.

The *primary action* of Digitalin and Digitalis is to cause increased power of the heart's contractions, the pulse being first regular and slightly accelerated; next irregular and intermitting; and finally very slow, until the heart ceases to beat, and stops in systole, *i. e.*, in rigid, tetanic, permanent contraction, which ends in death, or *recovery with secondary effects.*

These *secondary* effects are the reverse of the primary, *i. e.*, the pulse is very slow and soft, then irregular, intermittent, and weak, and finally quick and weak; the heart rarely completing its normal contractions, because of the feeble condition of its muscular fibres.

Now it is evident to me, as the result of twenty-five years of close observation, that Digitalis is homœopathic to both its primary and secondary effects; but that it has rarely been used except for the latter. Hahnemann evidently did not understand the action of Digitalis; he as much as confesses it in several instances, as when he states that its action in certain dropsies is "curative but nevertheless antipathic."

Now it is a fact, that unless we understand and appreciate the secondary effects of drugs, a large proportion of our cures made with appreciable doses *appear* to be antipathic. This is especially the case with Digitalin, and this is the reason our school is continually losing the advantage they might gain by the rational use of Digitalis in many diseases.

Now, according to my law of dose, if we prescribe Digitalin for symptoms similar to its primary effects, we must prescribe the attenuations as high as the 6th, or we shall get unpleasant aggravations. But if we are treating conditions similar to its second-

ary effects, we must use the low attenuations. The question is, How long can we go with safety?

Digitalin (and I must here warn you not to use the spurious substances called by this name, manufactured by various firms in this country, for they are generally inert, or no more powerful than the dried leaves), the *crystallizable* active principle (alkaloid), occurs in short and delicate needle-shaped crystals, and possesses an intense and persistent bitter taste; slightly soluble in water; soluble in twelve parts of cold and six of boiling Alcohol, of 90°; less soluble in absolute Alcohol; nearly insoluble in Ether; and very soluble in Chloroform.

Amorphous Digitalin is a whitish or yellowish powder, odorless, but of a very bitter taste, nearly insoluble in Ether and water, readily soluble in Alcohol. Crude Digitalis is said to contain ten or twelve per cent. of crystallizable Digitalin, which is said to be somewhat more powerful than the amorphous Digitalin.

Either preparation is a very powerful poison. It is said that "*one-ninth* of a grain has been taken without toxic effect," but I advise you not to try such a dose. One-fiftieth of a grain has caused very unpleasant if not dangerous symptoms. I should not like to give one one-hundredth of a grain frequently in repeated doses. When we wish to get prompt, decisive action, as in a case of cardiac failure, syncope, or threatened paralysis, a few doses of the one-hundredth might be given, but for general use in cardiac diseases the one-thousandth (or 2°) is as low as I advise you to use it for adults.

The action of toxic doses of Aconite, Veratrum viride, Veratrum album, and Gelseminum is just the opposite of Digitalis; for in a case of poisoning by the latter, or serious aggravation from an overdose, Aconite or Verat. vir. is the best antidote (in doses of one to three drops of the tincture, repeated frequently until the symptoms are better).

In my "Lectures on Diseases of the Heart" I have carefully pointed out the characteristic symptoms and conditions for which Digitalis is indicated. I will therefore only briefly enumerate them.

In *cardiac diseases* it is primarily indicated (in high attenua-

tions) when the heart is excited and beats with increased force and power, causing congestion of the head, ringing in the ears, flushed face, etc. Such conditions are usually caused by overexertion, overexcitement from the stimulating emotions, certain cerebral irritations, etc.

In pure hypertrophy, *i. e.*, with enlargement of the heart-muscle, where allopaths now pronounce Digitalis unsuitable, it may be used with advantage in the 6th dilution.

But its chief value is in those conditions which simulate its secondary toxic effects, namely:

"When the muscle of the heart is for any reason unequal to the task set it, the systoles become rapid and imperfect, and by this irregular action the ventricles, neither completely filling nor emptying themselves, increase the embarrassment. Under these circumstances, Digitalis, by lengthening the diastolic pauses and increasing the force of the systolic contractions, causes the ventricles to fill themselves in the one, and to completely empty themselves in the other act. By subduing irregular action through the inhibitory nerves, by energizing the muscular power of the heart vessels, the remedy is of incalculable value, and, increasing arterial tension all over the body, causes the disappearance or lessening of symptoms due to a low pressure in the arteries."

The Digitalin would therefore be indicated in *hypertrophy with dilatation, mitral insufficiency, aortic constriction, irritable heart without enlargement,* and many *valvular diseases* with cardiac debility.

There are many cases, and you will meet with them in practice if you watch for them, where the patient seems suffering from a condition known by the vague term "general debility." There is an atony of all the tissues, and a poverty of all the secretions, due to lack of assimilation of the nutritive elements of food. You will observe in all these cases that the *heart* appears to be the weakest organ, probably because it is *constantly laboring.* Now, while you are building up the system with good food, fresh air, gentle stimulation, and such medicines as Nux, Phosphates, Ferrum, and the like, do not forget to give a special tonic for the heart. It will aid in a wonderful manner other remedies. Thus, if you alternate Digitalin 3^{x} with Ferrum 1^{x} you will succeed

in curing anæmia and chlorosis in half the time you can with Ferrum alone. Digitalin 3^x and Phosphate of strychnia 3^x act beautifully in alternation in feeble, broken-down constitutions. You can alternate Digitalin with many other specific restorative medicines now that you understand the principle involved.

In *cardiac dropsy* we know that Digitalis is the chief of all remedies. When the heart has become so weakened that effusion takes place in all the cavities and the general cellular tissues (anasarca), we know of no medicine which will bear any relation to Digitalis in curative power.

It has been suggested that Digitalin might act as well as the infusion of the leaves, or the tincture, both liable to deterioration, and at times uncertain in their action.

Christison's experiments prompted him to assert that "Digitalin was the most powerful and certain diuretic known," and that "its action on the heart, and its diuretic effect, were never coincident." All the old authors remark that Digitalis is not diuretic until *after* it affects the heart and pulse.

I think there are many cases where you can substitute the alkaloid for the herb and its other preparations. It will sometimes act promptly when the tincture or trituration of the leaves will not, or have lost their virtue.

In cases of dropsy from heart disease, begin with 3^x trit., in grain doses every two hours. If no action on the kidneys takes place in a few days give the 2^x in the same.

In *spermatorrhœa*, and *nocturnal emissions* from erethism of the sexual organs, it often acts with surprising efficacy. But do not give it as Baehr and Burt recommend, "in grain doses," unless you use the 3^x trit. Digitalin acts on the sexual organs of men much as the Bromide of potassa, namely, *it abolishes power and desire.* It is therefore primarily homœopathic to *impotency with spermatorrhœa,* and secondarily to *emissions with overexcitement.*

I would recommend, from my own experience, its use in *delirium tremens, fainting attacks from sudden heart failure, nervous vertigo, collapse from uterine hæmorrhage, poisoning* from tobacco, Aconite, Veratrum, Mushrooms, Calabar, and other poisons which weaken and paralyze the heart.

In fact, you can use Digitalin for nearly all the conditions for

which Digitalis is indicated, and it will often act quicker, and as safely, in the proper doses.

DIOSCOREA.

This plant, which is found in the Middle, Western, and Southern States, climbing over fences and shrubs, is known by the common names of Wild Yam and Colic-root. The former name is given to it from its apparent resemblance to the edible yam of the West Indies; the latter on account of its virtues in abdominal pain. I have often speculated on the manner in which the curative power of the root was discovered. It is easy enough to imagine why it should have been dug up under the idea that it might be used as an article of food, for its leaves and manner of growth closely resemble the yam used as a substitue for the potato. The root, however, is woody, and very tough and hard, so much so that when dried it is very difficult to pulverize it. How did the first colic patient ascertain its power in that disorder? It must have been by some accident, for it has no aromatic taste, like ginger or calamus, but is intensely bitter, with an acridity like that of Iris versicolor. But however discovered, it had a reputation among the aborigines for curing pains in the abdomen. You will hear the most enthusiastic praises of its power, and country nurses will narrate almost miraculous cures from its use in bilious colic after the patient was given up to die by the attending physician. It is generally given, in domestic practice, in hot infusion, and in quantities only limited by the patient's ability to swallow.

The allopathic school have always ignored it. The eclectics have valued it highly, and homœopathic physicians who have used it speak well of it in severe and peculiar cases.

It has been *proved* by Burt, Nichol, and Cushing. The provings by Burt were somewhat surprising. It seemed to affect the whole system in a manner reminding one of rheumatism, but a close study of its action will show that although the pains resembled rheumatism they were really *nerve-pains*, and generally of a reflex character. It also caused cutting pains in the umbilical region. Dr. Nichol's proving developed the same abdominal pains, with a good many head and mental symptoms. Dr. Cushing's provings

were heroic, and evolved very many peculiar symptoms. Some eclectic students also proved it, and got severe colic.

I am inclined to the belief that its sphere of action embraces the *spinal cord and the reflex nervous system* (generally), the umbilical plexus of nerves (specially), and by exalting the reflex excitability of the spinal cord it causes pains in portions of the body remote from the seat of the primary irritation. An eclectic writer says it causes hyperæsthesia of the spine, brain, uterus, and abdominal nerves.

Its chief *clinical use* in all schools is for that condition commonly known as *bilious colic*. This name, however, is not the correct one for all the cases designated bilious colic, for many careful observers assert that the liver is not at fault in the majority of cases, the vomiting of bile being only a symptom resulting from the spasmodic retching.

It is only in cases where the pain is caused by the passage of biliary calculi, or other obstruction in the gall-duct, that the name is at all appropriate.

It is only another illustration of the law of similars, that the abdominal symptoms caused by Dioscorea resemble the colics cured by it. Both start in the umbilical region and radiate all over the abdomen.

All who have written of the value of Dioscorea, outside of our school, coincide in their description of the colic cured by it. They say it is a "*constant pain, aggravated at regular intervals by paroxysms of intense suffering;*" the pain is located at first in the centre of, but is gradually diffused all over the abdomen, attended by vomiting, retching, furred tongue, distended and sensitive bowels, etc.

Now it is evident that no one distinct *disease* is here represented, but a definite disturbance of the abdominal nervous system, commencing at a given point (the umbilicus) and radiating all over the abdomen, extending to the stomach, uterus, bladder, and even to the extremities, and affecting both the *nerves of sensation and motion, causing pain and spasm.*

The fact is that *any kind of colic* may be cured by Dioscorea, provided the symptoms have any similarity to its pathogenetic symptoms. More than this, it has cured, and will continue to

cure, many abdominal and gastric pains not found in the provings. But if you find in any painful affection of the abdomen, stomach, uterus, or even the heart or head, that the pain, though constant, is aggravated in paroxysms; is attended by spasmodic symptoms (vomiting, cramps), or sympathetic pains in distant parts of the body, you can prescribe the Dioscorea with advantage. For instance, it has cured *headache*, remittent, paroxysmal, attended by spasmodic pain in the abdomen; *facial neuralgia; cardialgia; spasmodic* and *flatulent colic; painful tenesmus; spasm of the bladder and uterus; spasm of the gall-ducts; sciatic neuralgia*—the pain running from the hip to the ankles.

In addition to these purely neuralgic affections, it has been used successfully in many other disorders, among which are various kinds of *headache*. (For the indications refer to symptoms in Volume I.)

The headaches of Dioscorea resemble those caused by Æsculus, Bryonia, Nux vomica, and Cimicifuga.

The *eye symptoms* are quite notable, and Dr. Woodyatt predicts it will prove valuable in some affections of the eye and its appendages.

Acne punctata (comedones), according to Cushing, disappeared during the provings.

I have used it very extensively in many disorders of the stomach, such as accompany *dyspepsia*, namely, a dull, wearing pain in the cardiac region of the stomach; inordinate belching of gases; cramps of the stomach and acute lancinations in the stomach. It seems to resemble in its action on the stomach Bismuth, Bryonia, and Nux. It is of value in the *vomiting, pyrosis*, and *gastralgia of pregnant women*, or when occurring *during the menses*.

My experience accords with that of Dr. Helmuth, who says it is most successful in *enteralgia* when the pains are *twisting*, aggravated by lying down, relieved by pressure, unless the abdomen is tender. The abdominal pains have a remarkable resemblance to those of Colocynth, and you will often find it impossible to decide which is *the* remedy. You can only try the one which *seems* the best indicated for a reasonable time, and then use the other, but never alternate them.

It is just as useful in *renal colic from passage of calculi* as in

hepatic colic. In fact, renal colic is often mistaken for bilious colic by superficial observers.

You will find it an excellent remedy in *diarrhœa*, which, like the sulphur-diarrhœa, occurs in the *early morning*, driving the patient out of bed. The stools are slimy, jellylike, like white of egg, attended by straining, burning in the rectum, and generally, not always, by the peculiar *twisting*, lancinating colic in the umbilical region, offensive flatus, and often nausea and vomiting.

This kind of diarrhœa often runs into *dysentery*, or may be called the first stage of dysentery, especially when the disease is a *catarrhal mucous enteritis*. In the Dioscorea dysentery the stools are not *bloody*, *i. e.*, the symptoms do not indicate it for bloody stools, but it will remove its characteristic colics, pains, and tenesmus without arresting the sanguineous discharge, which may call for *Ipecac.* or some remedy more homœopathic to that condition.

Cholera morbus, when attended by excruciating abdominal pains, has been greatly palliated by Dioscorea; but as it is not indicated for the watery evacuations, it should be alternated with Camphor or Veratrum. Even in cases of *cholera infantum* I have often given it for the excessive pain in the bowels which causes the children to scream in agony. In this respect it resembles *Cuprum* in all but the *cold extremities* caused by that medicine.

Dr. Burt had hæmorrhoids and yellow, thin, bilious stools, with prolapse of the rectum when proving Dioscorea, but no other prover had piles. No clinical experience proving its value in this affection has been recorded, except one observation, by the same prover, that a "hæmorrhoidal tumor of nearly four years' standing disappeared during the proving."

A medicine that can cause tenesmus can cause hæmorrhoids, and you may possibly find it a good remedy in the latter disease.

In Cushing's provings it developed a decided action on the male organs of generation, and, fortunately for practitioners, its primary and secondary action were noted. It first caused strong-smelling perspiration of the genitals; constant excitement, with strong and frequent erections day and night; and amorous dreams with emissions. Afterwards came the reaction,—the genitals became cold and relaxed; no erections; desire absent, and emissions in sleep *without* erections.

Now to prove that my law of dose is trustworthy, I cite Dr. Cushing's several cures of *nocturnal emissions*, having the primary symptoms of Dioscorea, which he cured with the dilutions above the 15th ; also Dr. Pease's case of *spermatorrhœa*, having its secondary symptoms, which he cured with the 2^{x} trit. of Dioscorea. In respect to its action on these organs, Dioscorea resembles Phosphorus, Cannabis indica, and Nux vom., and is the opposite of Caladium, Camphor, Agnus castus, and Nuphar, which cause *depression* of the genital functions primarily.

Dioscorea will be found valuable in *pain and spasm of the spermatic cord*, when the pains commence in the inguinal region, and extend to the testicles and penis.

No provings have been made on women, but it has been found useful in *dysmenorrhœa, uterine colic, after-pains*, and some of the false pains of pregnancy.

The symptoms indicate that it may be a good remedy in *intercostal neuralgia*, and one physician claims to have cured with it a case of *angina pectoris*, with "sharp, cutting pain in the region of the heart, arresting breathing and motion." Dr. Cushing has cured "*cough*, with pain in the epigastrium and temples, brownish-yellow tongue, and weak knees."

You may find it of value in some of the protean forms of *spinal irritation*. It has been recommended in *felons* and *neuralgic rheumatisms of the extremities*.

It is a remedy which ought to be still further studied, proven, and used in practice.

Much depends on the preparation which is prescribed. I rarely got good effects from the tincture, probably because it was made from the dried root. Others have failed to get the desired results from the tincture. The triturations of the dried root, or of Dioscorein, have acted satisfactorily. In the colic for which it is so useful you may fail with the ordinary preparations, while the infusion of the root, made with hot water, will act magically. (One drachm of the pulv. root to ℥iv of boiling water. A teaspoonful or two every 15 or 20 minutes in the worst cases.)

Dr. Scudder ("Specific Medicine," p.128) says the article sold for Dioscorea by most of our druggists for the past ten years, and from which Dioscorei*n* has been prepared, is the root of a species of

Smilax. This will probably account for the unreliable quality of some of the homœopathic preparations.

DORYPHORA.

The poison of the Colorado potato-bug appears to resemble Cantharides, with which it is closely allied. I collected many cases of poisoning, some fatal, together with a partial proving by Dr. Ruden, and published the symptoms in the third edition. Its analogues are the narcotic poisons, Belladonna, Stramonium, Agaricus; and the animal poisons, Apis, Lachesis, and Crotalus.

I have never used it. The only clinical experience yet reported is the cure of a few cases of *dysuria, gonorrhœa,* and *dysentery.*

Its pathological effects are more malignant than those of Cantharis, and less so than Lachesis.

You may find it specific in some cases of *meningitis, cerebral congestion, ophthalmia, enteritis, malignant erysipelas, anasarca,* and inflammation of the urinary organs.

The keynote for the selection of this medicine will be the presence of its peculiar urinary symptoms, when occurring in the conditions above named.

EPIGEA REPENS.

This beautiful plant, the trailing Arbutus, around which clusters so much poetry and sentiment, has been used for very non-poetic purposes. Medicinally, it is an analogue of Uva ursi, Mitchella, Chimaphila, Cannabis, and others of that class. No provings have been made of it, but it has been used ever since the settlement of this country as a popular remedy in *renal calculi,* or those conditions supposed to arise from the presence of "gravel." It has been successful in the removal of *dysuria* and *strangury* as well as *urinary tenesmus.* It seems best adapted to the *uric acid calculi.* I once used it in a case of that nature; the urine had a bloody, muco-purulent sediment, and there was intense dysuria. After taking the tincture in ten-drop doses, six times a day, a copious deposit of fine brown sand (uric acid crystals) was observed, followed by amelioration of all the urinary troubles.

ERECTHITES.

This plant contains an *oil* which goes under the name of *Oil of Fireweed.* But an "Oil of Fireweed" is also extracted from the *Erigeron.* The true *fireweed* is, however, the Erecthites, while the Erigerons are "Fleabanes." Chemists tell us that the oils from these two plants, as well as turpentine, are chemically identical. This may be true, but it does not follow that their physiological or pathogenetic effects are identical. They are very closely allied, however, in their effects on the human system. All three are homœopathic to both *active and passive arterial hæmorrhage;* the former is their primary, the latter their secondary effect.

The Fireweed has been proven, but not very thoroughly. Sufficient symptoms have been obtained to give us a clue to its method of action.

It seems to cause primarily an acute congestion of the principal organs of the body. The headache is similar to that caused by Belladonna and China, or that headache which often precedes epistaxis in plethoric subjects. Had the provings been carried far enough, nosebleed would doubtless have resulted. It is a specific for *epistaxis of bright-red blood* as well as *hæmorrhages* of similar character from the *mouth, lungs, bowels, uterus,* and *kidneys.* The primary hæmorrhages of Erecthites, Erigeron, and Turpentine are always attended by *excitement of the circulation.* In such conditions you must be cautious and not prescribe too large doses, certainly not below the 3ˣ.

The passive hæmorrhage of these medicines is very different in character; it is attended by a torpor and laxity of the bloodvessels, and the blood is darker, lacks fibrin, and deposits a blackish sediment, showing disorganization of the blood-globules. We find this latter form in typhoid fever, Bright's disease, and other diseases of low vitality. In passive hæmorrhages you will get the best results from the 1ˣ or even drop doses of the oil or mother tincture.

The action of Erecthites on the mucous membranes is that of an irritant. It causes burning in the *stomach* with cramps, nausea, and vomiting; cramps in the abdomen, with copious yellow diarrhœa, worse in the morning (Copaiva, Sulph., Dios.).

One person was cured of a *dyspeptic* condition from which he had suffered for some time, namely: "Eructations and heartburn after eating warm bread and coffee."

In *dysentery*, when the discharges are pure blood, with fever, colic, etc., alternate the Erecthites with Aconite or Ipecac., and you will soon arrest the disease.

In premature and profuse menses it rivals Calc. and Senecio. My favorite method of treating this aberration is to give Calc. or Senecio during the latter part of the month, and when the menses appear give Erecthites or Erigeron until the flow ceases to be abnormal in quantity.

Gonorrhœa and *gleet* have both been treated successfully by this remedy. It differs from Copaiva and Cubebs in the character of the discharge, which is always scanty. The inflammation is more like that of Cantharis and Turpentine, with *scanty, bloody* discharges and great pain. When *orchitis* occurs during gonorrhœa, or from suppressed discharges, it is equal to Pulsatilla or Clematis.

ERIGERON.

Many of the recommendations for the use of Erecthites will apply equally well to Erigeron. For some reason the latter appears to be more popular with the profession. If both were thoroughly proven we should doubtless get characteristic symptoms; but at present we can substitute the one for the other, especially in *hœmorrhages*, without much fear of failure.

We have more decided *renal* symptoms from Erigeron, and in some cases of nephritis, and in some cases of Bright's disease I have used it with decided advantage.

Dr. Ring once published his successful use of it in *dysuria in children*. "They have frequent desire, and cry when urinating; the urine is profuse, and of a very strong odor; the external parts are inflamed and swollen." He used a low attenuation.

I have found it excellent in *vesical catarrh*, with unusual pain and irritation.

In *uterine hœmorrhage* it is inferior to no remedy. Eclectic physicians consider it *the* specific in the worst cases, in doses of ten drops of the *oil*, repeated every twenty or thirty minutes.

It is not necessary to use such large doses; 10 drops of the 1ˣ is quite sufficient. I prefer the 1ˣ trituration of the oil, or even the 3ˣ, if there is much arterial excitement. It resembles *Ferrum* in its applicability to active hæmorrhage.

Of course you will not expect to avert permanently any hæmorrhage from the uterus with this or any remedy, if any foreign substance, like a retained placenta, a polypus, or other matters remain. It may check the bleeding for the time, but the substance must be removed before the patient is safe.

We find some rheumatic symptoms in the provings, but if it is homœopathic to any kind of *rheumatism*, it is that which arises from some affection of the urinary organs, or *gonorrhœa*.

It has been very highly praised in *gonorrhœa* and *gleet;* very many prefer it to any other remedy in that affection. It is said to cure cases which have resisted Cubebs, Copaiva, and other routine medicines.

In *tympanites* occurring during typhoid fever, enteritis or peritonitis, I consider the Erigeron, next to Turpentine, the most reliable remedy we possess. I do not know which to give the preference. I can not imagine why both are ignored in our works on practice.

They recommend China, Phosphorus, Rhus, and other drugs, which may answer in mild cases, but are useless when the intestines become paralyzed by distension. Nor do I depend upon the internal administration alone, but habitually use them in enema, throwing up half a drachm or a drachm, beaten up with yolk of egg, and mixed with a pint or more of milk. The most enormous and dangerous tympanites will disappear after a few such enemas.

Both Erecthites and Erigeron are analogous to Arnica and Sulphuric acid in the treatment of *contusions* and *suggillations*. Country people use the bruised plant as we use Arnica. A dilute tincture, used in the same proportions as we prescribe Arnica, is an excellent topical application in bruises.

EQUISETUM HYEMALE.

The *scouring-bush* has been used from time immemorial as a domestic remedy for *dropsy, suppression of urine, gravel, hæma-*

turia, *gonorrhœa*, and *gleet*. An infusion of the stalk is made with hot water and drank *ad libitum*. It contains a large amount of mucilaginous fluid, and perhaps soluble Silica, both of which may aid in its diuretic effects.

Dr. J. S. Marsden, one of our best homœopathic physicians, writes me that he has used an infusion of the stalks very successfully in the *dysuria of women*, with "extreme and frequent urging to urinate, with severe pain, especially *immediately* after the urine is voided." He has also used it in painful urination with *albuminous* urine.

It must possess some specific influence over the mucous membrane of the bladder. Dr. M. gives his infusion in tablespoonful doses.

I would suggest that you try it in the troublesome *dysuria of children*. I do not know that the dried stalks are efficient, and I would suggest that if you wanted to keep the remedy on hand, you should make a *strong* decoction and add one-tenth its bulk of good alcohol. This will make a permanent preparation, which will doubtless be efficacious in drop doses of the crude or first dilution.

ERGOTIN.

Ergotin was discovered by the chemist Wiggers, and was believed by Professor Schroff to contain all the medicinal properties of Secale. It has not been used to any considerable extent in this country, and very rarely by our school. In its crude form it looks like an oleo-resin, a thick, syrupy, brown substance, with the peculiar smell and taste of good powdered Ergot. The triturations are best made with granulated sugar of milk.

In the "North American Journal" for 1859 is to be found a translation by Hoffendahl of a paper on Ergotin by Dr. Kafka, of Prague, who uses the following language: "Just as Atropia is applicable when Belladonna is indicated, but appears insufficient, in the same manner Ergotin is to be used when Secale does not answer our expectations, perhaps because the preparation is not reliable, or the remedy is not sufficiently powerful." To which I will add that the preparations of Ergot are notoriously unreliable, especially when kept for a long time.

The trituration of Ergotin (of Wiggers or Bonjean) is a very convenient preparation, and will keep for any length of time in any climate.

Kafka's clinical experience with Ergotin was altogether in *uterine hæmorrhage.* He gives the well-known indications of Secale, namely: "Excessive and protracted menstruation; menorrhagia; venous congestion of the womb; hæmorrhage from the womb, passive and paralytic, of dark fluid blood, pouring out at every motion or elevation of the body; hæmorrhage during and after delivery; hæmorrhage from cancer of the womb; insufficient contraction of the womb after abortion; irregular, feeble, deferred, or spasmodic labor-pains."

You will observe that all these symptoms, except the last one, are secondary symptoms of Ergot. Kafka gave for these conditions grain doses of the first decimal trituration, which is in accordance with the requirements of my law of dose.

The *primary* uterine symptoms of Ergot are: *Very severe, spasmodic, very painful contractions of the uterus, almost continuous;* if occurring during menstruation, the flow scanty, only a few drops; if during labor the pains seem to do no good, for the very severity and continuousness of the contractions wear out the mother, and may injure the child; if they occur at other times they are due to some spinal irritation, and are called "uterine cramps;" also *uterine congestion,* of an active, arterial character, such as occurs before inflammation sets in.

When these symptoms occur you will do injury if you prescribe the first decimal trituration. Keep above the *third,* not too frequently repeated.

Kafka gives one case of *protracted menstruation,* one of *hæmorrhage after delivery,* one of *climacteric menorrhagia,* and one of *profuse menstruation.* In all these cases this characteristic symptom was present: "*Little or no pain, the blood in dark clots, or dark fluid, aggravated by any motion or mental excitement.*" In all, Secale 1st was tried, ineffectually, while Ergotin 1st acted promptly.

I have used Ergotin occasionally ever since I read that article, and its administration has generally resulted satisfactorily. But I use it in other conditions besides uterine troubles.

The recent researches of Brown-Séquard and other eminent experimenters show that Ergot has uniformly this primary effect,

namely, *a contraction of the bloodvessels in every portion of the body.* In organs like the brain and lungs, the effect is bloodlessness or anæmia. In the uterus and other hollow organs it contracts all their tissues as well as their bloodvessels.

The *secondary* effect or reaction is a relaxation or even paresis of the coats of the bloodvessels; thence, passive congestion, hæmorrhages, relaxation of muscular tissues, and finally their complete paralysis.

Brown-Séquard, Hawley, and others claim that Atropia has this same effect upon the bloodvessels of the spinal cord, but I have my doubts. The proofs are not sufficient to satisfy me. Nor is the Atropia useful in any case of hæmorrhage, as it would be if its action was similar to Ergot. I know of no drug that acts exactly like Ergot, unless it is *Ustilago*, a similar fungi. Caulophyllum somewhat resembles it, but how close we cannot now determine.

In accordance with its pathological effects, and selecting it by its secondary symptoms, I have used Ergotin very successfully in very severe *congestive headaches*, when they occur in persons of lax fibre, large, phlegmatic, lymphatic individuals, whose bloodvessels are doubtless relaxed and easily distended, almost to bursting, whenever the circulation is abnormally directed. Such *headaches* usually occur at the *climacteric period* in women, and in old drunkards of both sexes. The pain seems to rise up into the head from the back of the neck, the occiput first suffers, then it extends all over the head, and the agony and distress, more than the acute pain, become almost unbearable. The face is rather pale and cool than suffused, the extremities cold and livid. (This is not the case when Belladonna or the Bromides are indicated, for the face is hot and red, with throbbing temples.) The congestion is more internal, central, than general or peripheral. Sometimes the head is drawn backwards by *almost continuous contractions.*

In this condition Ergotin, in doses of one-tenth or one-twentieth grain (using the 1ˣ trit.), given every half hour, soon removes the sometimes dangerous condition.

In *cerebro-spinal meningitis,* when the above symptoms occur, the Ergotin acts very satisfactorily.

In *passive pulmonary hæmorrhage* it acts as well as in uterine, in which my experience accords with Kafka's.

There is another very valuable use of Ergotin, which should not be lost sight of by our school, namely, its value in *paralysis*. In all the cases of severe poisoning on record, and in all the experiments on animals, *paralysis* is generally a prominent effect of the drug. Yet the old school are now using it extensively in paralysis, and with good results. Brown-Séquard was the first to recommend it in a distinct form of paralysis, and to point out the pathological condition upon which the paraplegia depends, and which large doses of Ergot cures. In his admirable *brochure*, "Paralysis of the Lower Extremities," he says:

"This powerful remedy has been employed quite blindly, although its mode of action being better known than Belladonna, it would have been easier to discern in what cases of paraplegia it is able to be of benefit. Ergot, like Belladonna, produces a contraction in the bloodvessels of the spinal cord and its membranes, and therefore diminishes the amount of blood circulating in these organs. The following is a summary of the indications and contraindications for its use:

"1st. Ergot must be employed in cases of paraplegia with irritation of motor, sensitive, or vasomotor nerves, *i. e.*, in *congestion or inflammation of the spinal cord and its meninges.*

"2d. Ergot must be *avoided* as an agent only able to increase the paralysis in cases of paraplegia without symptoms of irritation, such as cases of reflex paraplegia, or of non-inflammatory softening of the spinal cord."

These directions for the use of Ergot may do very well for the allopath, but our therapeutics need a broader scope. Let us inquire *How does Ergot cause paralysis?* Evidently by causing such an anæmia of the spinal cord as to diminish or abolish its nutrition, and thereby its vitality.

This is the condition which Brown-Séquard describes as being present in *reflex paraplegia*, and in which he declares Ergot to be injurious. And so it would be in massive doses, but we, who believe in the efficacy of attenuated medicines when indicated, are not confined to the use of Ergot in material doses.

I believe, and have substantiated it in practice, that Ergot *is*

useful in *paraplegia* from *reflex irritation, i. e.*, when anæmia of the cord is present, and non-inflammatory softening is imminent. But in such cases the dose must be in the attenuations above the 3ˣ trituration of Ergotin, or above the 1ˣ of a good tincture.

Although it has been decreed that it may be used, and has been used with apparent success in congestion and inflammation of the spinal cord, I do not think it is safe in large doses if the disease is acute and intense. The secondary action of Ergot is *passive congestion* (*engorgement* is a better word) of the cord and its meninges. In active inflammation I prefer Veratrum viride, but in *passive congestion* or *chronic inflammation*, or even the second stage of *spinal meningitis* (when of a low type), I am willing to accord a curative value to Ergot, and admit that it must be prescribed in material doses, *e. g.*, the 1ˣ of Ergotin, or pulv. Ergot, or drop doses of a good ethereal tincture or a fluid extract, repeated every two or three hours until improvement sets in. In old cases a dose three or four times a day will suffice.

Finally, you will find Ergotin a valuable remedy in some obstinate *neuralgias* (sciatica and odontalgia). In *nightsweats*, in *chronic diarrhœa* and *chronic dysentery*, in certain cases of the *hæmorrhagic diathesis*, in *hypertrophy of the uterus*, in *uterine tumors*, *aneurisms*, *impotence*, *spermatorrhœa*, and probably *varicose ulcers* and *senile gangrene*.

ERYODYCTON.

This plant, known in California under its Spanish name of "Yerba Santa" (or Holy Plant), resembles in some points the Grindelia. In other respects it appears to be an analogue of Phosphorus, Hepar sulph., Rumex, Causticum, and other medicines which have a specific action on the larynx and bronchia. It causes a blennorrhagic condition similar to that of Grindelia and its analogues, but it differs in this respect, namely, that there is not much asthmatic dyspnœa, but instead we have a constant, irritating cough, with great soreness in the chest, a feeling of excoriation, rawness, and other symptoms denoting great hyperæsthesia of the mucous surfaces. Like Grindelia it is *primarily* homœopathic to inflammatory action, and when used for *acute* bronchitis or laryngitis should be used in the middle attenuations.

The higher the febrile irritation the more pain there is present, and the dryer the cough the higher should we go in the scale of dilution. But when the acute disease has passed into the chronic stage, and there is great weakness of voice, profuse muco-purulent expectoration, soreness, and cramp in the chest, loss of appetite, emaciation, etc., then will Eryodycton, in appreciable doses, act beautifully. Dr. G. M. Pease's provings in Allen's "Encyclopedia" show that it affects the right lung (bronchia) in preference. It is as useful in acute and chronic coryza as in bronchitis. Altogether, I predict that it will prove a valuable addition to our Materia Medica.

Later experience has satisfied me that it has powers which resemble *Stannum*, *Copaiva*, and *Drosera*, for I have cured several cases of *chronic muco-purulent bronchitis* and *whooping-cough* with the lowest dilutions.

ERYNGIUM AQUATICUM.

This endogenous-looking plant, resembling in its leaves the Yucca of our gardens, grows all over the West on the low prairies. It does not grow in swamps, *in water*, and therefore is not quite correctly named.

It has a peculiar taste (the root), somewhat like Senega, but more like Aralia racemosa.

In its action it resembles several medicines, more particularly Cubebs, Copaiva, Hepar sulph., Senega, and Spongia. It appears to have an affinity for the mucous membrane of the *larynx*, *bronchia*, *bladder*, and *urethra*.

The provings show that it is homœopathic to *catarrhal inflammation* of the fauces, throat, larynx, and urinary organs.

It has cured *catarrhal ophthalmia* (conjunctivitis) in a scrofulous subject.

The head symptoms are very similar to those cases of *rheumatic catarrhal headache* which occur before a coryza breaks out, or when a catarrhal discharge from the head is suppressed.

I have found it a valuable remedy in some cases of *epidemic influenza* which were not readily controlled by Gelseminum and Sticta, when there were raw, smarting, burning sensations in the

throat and larynx, with constant, irritating cough, and expectoration of tenacious yellow mucus. This confirms Dr. Morgan's experience reported in my previous volumes.

It ought to prove curative in *catarrh of the stomach*, a disorder with which its symptoms and genius correspond.

Dr. Cushing reported a case of *hæmatemesis*—following a blow on the epigastrium—which he thinks he cured with Eryngium, but I can see no special indications for its use in such cases, and would prefer to rely on Arnica or Sulphuric acid, which experience has found so useful.

Dr. Morgan says he has used it with success in the *mucous diarrhœas of children*, which I do not doubt.

He also says: "In leucorrhœa and gonorrhœa it has a specific influence. It certainly does act on the virile force, suppressing it, as several instances have proved to my satisfaction."

This allusion leads me to refer to a proving of *Eryngium maritimum*, by J. B. Ivatts, of Dublin, Ireland, found in the "American Observer," vol. x, p. 164, in which he refers to the medical history and popular beliefs concerning that species. The general reputation of the Sea-holly is that of an *aphrodisiac*, or an *excitant* of venereal desires. It is singular that opposite properties are alleged of two species of the same genus. But this is not so strange as giving opposite qualities to the same plant; which, however, can be explained by the doctrine of primary and secondary effects, and in no other way.

Mr. Ivatts's provings show a decided similarity in the two species of Eryngium. He got similar laryngeal symptoms and urinary aberrations. To his surprise—knowing the popular reputation of the plant—he got "great insensibility of the glans corona, with *absence* of all desire for coition for several days; the *power* of erection seemed gone." This shows the double action of the drug. He thinks it the secondary action, which is quite probable. The alleged curative powers, as recorded by old English herbalists, accord with the reputation of our indigenous species among the common people.

King, in his "Eclectic Dispensatory," says a few grains of the root, taken several times a day, will cure *hæmorrhoids* and *prolapsus ani*, but we have no clinical confirmation of it.

The two cases of *spermatorrhœa* recorded in Hill and Hunt's "Surgery," cured by Eryngium, influenced many to use it in that complaint, but the success attending its use was meagre. It may be applicable to some cases, but we have not yet any definite characteristic indications.

I would recommend a trial of it in those cases of *gleet* which recur after every exposure to cold, and as a result of catarrhal affections.

While this edition is going through the press, Dr. I. J. Whitfield, of Grand Rapids, sent me his experience with Eryngium in *renal calculi.*

The first case in which I used Eryngium aquat. was in that of a married lady, twenty-eight years of age, a fleshy blonde. She had suffered from renal colic since seven years of age, with intervals of freedom from attacks, though rarely reaching beyond a year at a time, and often for years having them from once in two or three months to one a month; latterly, for a long time averaging one in three weeks, and at the last every week, so that her life was one of suffering in the extreme.

The most heroic treatment was necessarily resorted to for the relief of pain, such as Chloroform, subcutaneous injections of Morphia, with large doses of Gelseminum, sometimes Atropia instead of Gels.

The difficulty was confined to the left kidney. The attacks usually gave way suddenly, preceded by a gush of water (urine). I had gone over the ground with remedies recommended in such cases during the year this patient was under my treatment. Noticing the statement that Eryngium was particularly useful in affections of mucous membranes, with an apparent affinity to the left side, and my patient's bladder symptoms corresponding to those given by Hale in the third edition of "New Remedies," also covering the abdominal symptoms, I decided to give this remedy. I accordingly gave it in first dilution, teaspoonful doses three times a day. Within three weeks after beginning its use, one very severe attack came on that proved to be the last. My next visit was to look after vesical tenesmus, persistent and severe; but on my arrival it had suddenly ceased, at the expulsion of a large calculi, about the size of an ordinary hazelnut, irregularly dark and rough. I continued the remedy for several months after this last attack. The cure seems to be complete at this date, some eighteen months.

The second case was under treatment at the same time the lady was, so that as soon as her case terminated I put this case on the same remedy.

My second case was a thickset, fleshy man, about forty years of age, mail agent on railroad. He first came to me suffering from stricture of urethra, at which time I learned that at times he suffered terribly from attacks of what he called bilious colic, so named by his physicians also. He was under my care but a short time for stricture before he fell into the hands of another physician, who treated him for a year or more for the same difficulty without much if any relief. On his

return to me he informed me that his colic attacks were more frequent and more severe, if possible, and that he feared he should die in some of them yet, unless I could do something to cure him. He was now looking very miserable indeed. I entered upon an investigation of his case, and soon became satisfied that his was renal colic also. Although this man had had gonorrhœa, I now mistrusted that his stricture was spasmodic. After a useless treatment of one or two months I put him, as before said, upon the Eryngium, as in the first case. He visited me twice after the first presentation for a renewal of the medicine. If my memory serves me rightly, he never had another attack after beginning the use of the Eryngium. At his last call he considered himself a new man; never felt better in his life. I am hoping that he will have another attack, so that I may see him again, as he has forgotten to pay the bill.

My third case, an old lady of fifty-five; very fleshy. Hers was an acute attack; but before seeing her I treated her for cystitis some three weeks, as I supposed, with but little relief from bladder symptoms. Upon making a visit to her house I found unmistakable evidence of gravel. She was suffering from constant tenesmus, vesical, accompanied with a severe pain in the left kidney, with great tenderness over that region, extending down the ureter into the bladder. She was unable to lie down. Eryngium cured her in a week or ten days. A calculi was expelled, but lost, so that I never saw it. Some ten months have passed and the case remains well.

EUCALYPTUS GLOBULUS.

In my "Symptomatology of New Remedies," Vol. I, I gave a fragmentary proving of this drug. Since that time it is grown into extensive use, and I deem it proper to acquaint our school further in relation to its therapeutic uses. I therefore compile the following from the best authorities:

The tree from which this remedy is obtained is one of the finest specimens of the Australian forest. It is an evergreen, and belongs to the natural order of Myrtaceæ, the same order that gives us the clove, cajeput, pimento, and other similar vegetable products of our Materia Medica. In its mother country it grows to a gigantic size, corresponding therein, in its native woods, to our "big trees of California" of the American forests. It is not unusual to find specimens four hundred feet in height. In 1862 a plank was taken from the body of one of these trees, and sent to England, that measured sixty-five feet in length, ten feet in width, and of a proportionate thickness. It was desired to send one that was one hundred and sixty feet in length, and of a proportionate size otherwise, but no ship could be found that could transport it. The wood is compact, quite heavy, and is impregnated with balsam, or resin, that gives it valuable keeping qualities, and of great use in the arts. From its resinous character it is more valuable for ship keels than our rock-elm, and it is this same resinous principle of high nautical value that makes it of so much interest to the pharmacist and physician. Besides these general features, it has another important one, that of rapid growth.

Forests spring up in a single decade of years. Trees twenty and thirty feet in height, in the Channel Islands, have been seen in four years from the planting time. In Texas they have been known to grow, from spring to November, to be ten or twelve feet in height. In Florida a growth of five feet in four months has been recorded. In California a growth of forty feet in height, with a diameter of one foot, has been attained in four years' time. As a shade tree it is not of value, as the trunk is so tall, straight, and limbless, save at the top, that the sunlight always strikes the ground, even at the base of the tree. The curious position and shape of the leaves also permit of this thorough permeation of the sunlight, a characteristic of the Australian forests.

We have just alluded to the peculiar-shaped leaves; in the young seedling they resemble our common myrtle leaves, but as the trunk lengthens out into its straight and slender form the leaves also partake of a similar formative growth, so that in the mature tree they are one inch in width by from four to seven inches in length. In color they are of a pea-green shade, which gradually turns darker as the plant matures. Instead of turning their flat surface to the sun, as is common with our tree-leaves, they hang in a drooping fashion from the stem, and so present only their edges.

Its fruit, preceded by purple-hued and solitary flowers, resembling our myrtle flower, except that they are more full of honey than our myrtle, is a reversed cone, with four prominent sides, and hangs high up near the top of the tree.

It is from the leaves and flowers that the most of the medicinal portions are obtained. Still, the wood contains them all, but in a lesser ratio and less manageable form. It is the oil, Eucalyptol, that is probably the active ingredient in the different Eucalyptal preparations.

The first experiments upon its antifebrile qualities were made by Dr. Tristany, in Spain, in 1871. They were corroborated by the trials made by Dr. Brunel, of Montevideo, and since then by the leading practitioners of most civilized countries. Besides their therapeutical value, of which we shall speak further on, the tree in its living presence is invaluable as a prophylactic to certain diseases arising from exposure to malarial miasm.

Tracts of land rendered absolutely untenantable from the ravages of malaria, may, by the influence of the trees growing thereabouts, be made fruitful and healthy. This has been tried in many countries, under many varying circumstances, and with uniform success. This is due to a threefold action, viz., the high, open growth of the tree, heretofore alluded to, permitting the free entrance of sunlight and air about the roots of the trees; the free and rapid growth of the tree, thus furnishing ready drainage for the sweltering swamps about which they may be planted; and, lastly, by the antimalarial influence of the balsamic odors with which it impregnates the surrounding air. The second factor is probably as important a one as any in the make-up of the antimalarial influence of the tree. When you come to put into figures the amount of representative moisture daily exhaled from one of these trees the result is really surprising. Of course no exact computation has been made, but from certain crude experiments made by the writer, a half dozen years ago, with the common maple leaf—a tree of slow growth, and one delighting in warm *dry* soils—we are sure that this factor is greatly underrated. Assuming one grain an hour to be the moisture-exhaling

work of each leaf (and this is less than our experiments with the maple leaf would warrant), we have, then, from twelve to fifteen grains of moisture daily as the representative draining work of each leaf; multiply this by the total number of leaf elements in a grove of Eucalypti and you get an enormous product. Gimbert states that a single tree draws *ten times* its own weight of water from the soil in which it grows every twenty-four hours.

As to the influence of the aroma, or balsamic odor, it is enough to mention that the toxicological influence of the drug is made manifest in many individuals by simply breathing the strongly impregnated air about the grove premises. We will need to mention but a single instance, out of the many that could be cited, of the antimalarial benefit derived from a grove of these trees. Dr. Logan, of Kern County, California, wrote that he had given the antimalarial influence of the Eucalypti a fair test upon his own place. He says: "This is cultivated by two Chinese companies; one company lives on the north and the other on the south end of the premises, about three-quarters of a mile apart. The localities both parties inhabit are favorable to the development of malaria, and, as might be expected, they have every year, during the heated term, suffered with malarial fever. Last winter we determined to test the much-vaunted virtues of the Eucalyptus. In February we gave to the party at the north end two ounces of seed, with directions that they should be planted near the house. They germinated finely, and produced several thousand of the young plants, but the frost killed most of them. About twelve hundred, however, survived. These, when the heated term had commenced, had obtained a height of about two feet, and emitted a strong aromatic or camphorous odor, perceptible at a distance of a hundred yards. In due time the party at the south end were visited by their usual mildly-distressing fever, but up to the present time (about the middle of the season) we have looked in vain for the first symptoms to develop in the other. They are all, to their own astonishment, in robust health. These trees now average more than three feet in height, and the atmosphere of the houses is strongly impregnated with their odor." The doctor then adds that though carefully searching for hygienic causes, other than the Eucalypti, none could be found. He has since planted all of the waste places of his farm with the trees, so firmly does he believe in their antimalarial virtues.

Our northern climate is too rigorous for the growth of the Eucalypti, though a few trees are known to be in Detroit, but there in hot-houses.

As to the therapeutics of the tree, quite a volume could be collected of the reports of successful cases. I spare you most of this and give only some of the more important and practical tests, or new uses of the drug.

Dr. Keller, physician in chief of the Australian Railway Company, reports the following cases, with results, as treated with Eucalyptus. The total number of malarial cases was 432. Of them, 310, or 71.76 per cent., were cured; 122 required a supplementary course of Quinine. Of those cured (310) 202 needed but a single dose of the remedy (the tincture); the remaining 108 cases had one or more subsequent paroxysms. Quinine had been given previously to the Eucalyptus in 118 out of the 432 cases. Of the 122 cases in which the remedy failed, 58 were cured with Quinine, 10 were sent home, 16 remained under treatment, and 38 remained *in statu quo*. Out of the 118 cases in which the Quinine had

been previously given, but failed of arresting the disease, 91 recovered under the influence of Eucalyptus, the remaining 27 were unbenefited. The several types of fever were as follow: Complicated quotidian, 117; simple, 73; total 190. Complicated tertian, 126; simple, 95; total, 221. Complicated quartan, 16; simple, 4; total, 20. Complicated quintan, 1. The complications were splenic and hepatic engorgements, anæmia, chronic gastric catarrh, paludal cachexia, etc. The remedy proved itself successful in 161 (61.9 per cent.) of the complicated cases, and in 149 (86.6 per cent.) of the simple cases. Cures, as classified according to the types, we find successes in the tertian to have been 75.57 per cent.; in the quartan, 70 per cent.; in the quotidian, 67.89 per cent. The remedy, in a single dose, arrested the disease in 107 simple and 95 complicated cases. The treatment was generally commenced on the fifth day after the first paroxysm, and the average duration was but 9½ days; whereas, in previous years, when Quinine was employed, 12½ days was the average time of treatment. The tincture was made by macerating for three months the leaves in alcohol. Ten pounds of the leaves yielded twenty-five quarts of the tincture; the average dose was two drachms, and the average quantity used per patient was seven drachms.

Dr. Burdel has employed it in 50 cases of quotidian, 39 of tertian, and 34 of quartan ague. The powder, tincture, and solid extract were made use of. In 57 cases he derived no benefit. The treatment extended from five to ten days. The extract in 10 to 12 grains, daily, was found most beneficial in preventing relapses; this was given for five or six days after the arrest of the paroxysm.

Castan reports 33 successful cases out of a total of 44 cases treated with the drug. Mees, out of 31 cases had 13 cured, 10 greatly benefited, and 52 partially relieved.

Lorinsen cured 43 cases out of 51 to whom he administered the tincture as an antiperiodic. In one case of failure, both it and Quinine were unavailing. Bohn reports a case of a child with masked intermittent, with cerebral complications, where the tincture in drachm doses proved successful in relieving the symptoms in four hours, and he recommends it in puerperal fevers. Boyce details a case of ague that had resisted Quinine and Arsenic, and was cured by the Eucalyptus in four days. He has used it with great success in catarrhal affections of the urethra. The oil he recommends of use in odontalgia. Curnow, of London, speaks of a Norwegian that had been five weeks with an attack of ague, tertian type. The temperature was from 104° to 105.6° F. at the acme of the fever before the administration of the tincture of the drug. The administration was commenced on a day preceding an attack, and given in drachm doses *ter in die;* it modified the attack on the following day so that the highest temperature of the paroxysm was but 100° F., instead of the customary 105°. No further return of the paroxysm was noticed. In another case, a Dane, who was admitted to the hospital after an attack of five days' duration, with severe paroxysms, lasting some twelve hours each time, the highest point of temperature reached at each attack was 106.4°. It was of tertian type, and just before the next attack was due the administration of Eucalyptus was begun, in the same doses, etc., as before. The next two attacks were modified in their severity, and were much shorter; the dose was then doubled, and he had but a single attack following this date.

Limbert has successfully treated wounds by the application of the fresh leaves

to the parts. After a few hours all the unpleasant odor emanating therefrom is counteracted, and a healthy state of healing goes on to complete citatrization.

Bucquoy, of Cochin Hospital, Paris, asserts that of all the drugs he has made use of in pulmonary gangrene, none have given him the satisfaction that Eucalyptus has. Out of the various cases treated, five were complete cures, while the symptoms of all the others were favorably modified. The cough lessened, the sputa was less abundant, and the offensive odor was entirely absent, and this after Carbolic acid had failed. He used it in the form of an alcoholate, half a drachm in a mixture of syrup, gum, and orange-flower water.

These antiseptic properties of Eucalyptus are due, mostly, to the oil (Eucalyptol) contained in the various preparations made use of. It (the oil) has been known to preserve blood for five months from decomposition (as long as Carbolic acid will do the same), which is longer than Turpentine will keep it unchanged. Limbert and Birch have both made experiments to this effect, and both confirm the statement. The action of the remedy upon the white blood-corpuscles is analogous to that of Quinine, as it restrains their amœboid movements, and hence its usefulness in the class of troubles, congestive in their nature, where it may be locally applied.

As an item of agricultural interest it may be noted that it has been asserted by French writers to be a remedy for phylloxera; that trees growing near the grapevines protect the vines from the ravages of this parasite. Experiments have also been made with the essence of the drug upon the diseased vines, by Abbe Rolland, in the manner of inoculation, and with such success that he has pronounced it, after a trial of two years of its virtues, "an infallible remedy." He makes a broad incision through the bark at the neck of the vine, and into this drops a few drops of the essence, or rubs it over the cut surface with a camel's hair brush. The result is, as he says, that in three or four days the parasites are destroyed, but the vine remains uninjured. The incision may be made in any other part of the bark, but the desirable result is more speedily obtained by making it as near the roots as possible.

I have now, in a sort of a rambling way, given you an insight to the literature of the drug. A volume could be collected, from various reliable sources, upon its hygienic and therapeutical value, but I trust that what I have given will be sufficient to call your attention to its chief merits. The literature is emphatic in its pronunciation of its success as an antimalarial agent, as a remedy of great value in chronic inflammation of the air-passages, as an antiseptic in surgical dressings, and as of value as a local application upon any inflamed mucous surfaces. Yet with all this literature at its back, it is a remedy of recent date. Prior to 1871 it was little known to the profession east of the Pacific Slope. Parke, Davis & Co. were the first to bring it before the professional public in the form of a fluid extract, and their first order, for only *twenty-five pounds* of the young leaves, exhausted the New York market. The price then paid was exorbitant; but it is now so generally called for, from their energetic advertising of its merits, that it is ranked with our drugs of lesser cost, and is of greater value than many whose age is more pretentious.—C. HENRI LEONARD, M.D., in "New Preparations."

NOTE ON SOME OF THE THERAPEUTIC VIRTUES OF EUCALYPTUS GLOBULUS.—Rather more than a year ago my attention was first drawn to this remedy by an interesting reference to it in Sir John Rose Cormack's "Clinical Studies." In a postscript to a case of cauliflower excrescence of the uterus, he mentions that latterly he has used, as an injection, an infusion of the leaves of the Eucalyptus, or a mixture of from one to four drachms of a tincture in eight ounces of tepid water. Besides being refreshing and comforting to patients so affected, these applications have in his experience a remarkable power of destroying the fetid odor of morbid discharges, *without the substitution of another unpleasant smell.* He extends the remark, after much experience, to the offensive discharges attendant upon cases of ozæna, cancer of the tongue and throat, cancer of the uterus, gangrene, and other affections accompanied by fetor. In the same postscript he mentions that in simple uterine catarrh he knows of no remedy equal in value to the Eucalyptus globulus. In these cases he has met with the most satisfactory results when it was simultaneously administered by the stomach and in the form of an injection. He adds:

"As Gubler has shown, the anticatarrhal virtues of Eucalyptus are most remarkable. With increasing experience of its power, I more and more use it in bronchial, vesical, and uterine catarrh, in gonorrhœa, and in gleet." These representations of Sir John Rose Cormack, and the circumstance which he also mentions, that a preparation of the essential oil in capsules is a favorite prescription with many leading physicians in Paris, led me to make trial of the remedy in a variety of cases during the past year. The only preparation which I have used has been the tincture, prepared by several of our most eminent chemists in Edinburgh, and I have seldom prescribed more than a teaspoonful, mixed with a wineglassful of water, twice a day. In several cases of bronchitis, with profuse expectoration, I have witnessed remarkable benefits after a very brief use of the remedy, evinced by a rapid diminution of the discharge, and also by a corresponding improvement in the general condition of the patient. But my object in writing this note is to recommend the internal use of Eucalyptus in a class of cases to which, as far as I know, it has not hitherto been considered applicable. . . . . It occurred to me that owing to its valuable properties as a disinfectant, deodorant, and astringent, it might prove useful in certain forms of disease in the stomach and bowels. . . . . A gentleman of seventy-five had suffered from formidable disease of the stomach for eight or ten years, and on several occasions had seemed very near his end, with every symptom of malignant ulceration. Great quantities of blood had been vomited from time to time, and at short intervals, seldom exceeding a fortnight, the stomach after becoming painfully distended with a sour *barmy* fluid was relieved by repeated vomiting, while life itself seemed

possible only with extreme lightness of diet and most vigorous self-denial. . . . . He has taken the tincture of Eucalyptus twice daily for many months, and during all that time has scarcely had even a threatening of those painful and exhausting attacks which had latterly occurred almost every week.

Another old gentleman, a retired medical man of eminence, who for some years has labored under symptoms which indicate disease of the stomach, and possibly the colon, is so sensible of benefit from the use of the medicine, that he can seldom abandon it for even a few days without being reminded of its importance and eagerly resuming it.

Another case, in which ulceration, or some other organic disease of the stomach, seemed the only reasonable diagnosis, the patient made an unexpected recovery from extreme attenuation and weakness under similar treatment.

I have tried it repeatedly in a class of cases which are usually regarded as ulcers of the stomach, threatening perforation, and with complete success. . . . . Of course no one will think of using the medicine as *a specific* in any case where it may seem to be indicated. All the details as to diet and general regimen, which would be deemed necessary without it, must be carefully attended to. In conclusion, I may say, that it seemed to me of manifest use lately in a case of diphtheria commencing in the gullet and ascending to the fauces; and my belief is that it might be prescribed with advantage in some cases of typhoid fever.—"Edinburgh Medical Journal."

EUCALYPTUS AS A DISINFECTANT, ANTISEPTIC, AND EPIDEMIC REMEDY.—I propose giving you a little of my experience in the use of Eucalyptus. About the last of August, 1875, I had a case of intermittent fever which Quinine did not touch, from the fact that it would not stay in the stomach so long as it was going down, even at the intervals between the sweating stage and chill. I suppose you will say that I did not prepare the stomach for the Quinine. The Eucalyptus prepared the stomach by antidoting the poison that produced the trouble, and the case was cured in three days—no more chills after the first fifteen drops of Eucalyptus were administered. It proved to be the only remedy the stomach would recognize as *the* tool which nature or the vital force required to work with in the case, and the beauty of it in such cases is, you can give it with all certainty without regard to stage, or, as the old folks used to say, "idiosyncrasy." You can call it antiperiodical in this case, or what you please. I only pretend to say, it was the specific antidote or remedy for the case.

CASE II.—"Facial neuralgia." Lady, aged 55, bilious and sanguine temperament, had been troubled by spells for several years. All the usual remedies failed to even afford relief. From its periodic character I tried Eucalyptus. (I

should have said that the patient possessed an erysipelatous diathesis.) From the first fifteen-drop dose I could see an amendment, and in twenty-four hours the neuralgia was gone; and at the usual time for it to return this fall it did not put in an appearance. There were slight symptoms, but two or three doses of Eucalyptus were sufficient to set all right again.

CASE III.—*As an Antiseptic and Disinfectant.* Having a case of retained placenta at the fourth month, and not being called in until the odor in the room became almost unbearable, I removed what I could of the putrid placenta, and ordered vaginal enemas of tepid water, adding a little castile soap, and used on my hands Carbolic and Salicylic acid, without much effect. I then tried Eucalyptus, which was at once the sufficient disinfectant. I at once returned and ordered the vaginal enemas changed to Eucalyptus put in alcohol equal parts, adding a teaspoonful to one-half pint or a pint of tepid water, and use at once, the enemas being repeated every three hours. Suffice it to say, the next day when I called there was no putrescency about the room or bed, although there were pieces of the placenta passed at several different times after the Eucalyptus was commenced, and the patient made a good recovery.

CASE IV.—Lady, aged 58. General erysipelas, with putrid dysenteric passages. Case pronounced hopeless by others. I gave a dose of Eucalyptus (fifteen drops), followed by Veratrum gtt. vij, water ℥iv, a teaspoonful to be given every half hour until a moisture appeared on the skin. The passages spoken of occurring every few minutes before taking the Eucalyptus, did not occur but once after the first fifteen drops in twelve hours, and no more putrescency. After the first dose I prepared Fluid extract eucalyptus ʒij, water ℥iv. Dose, a teaspoonful alternately with the Veratrum. The patient made a good recovery.

CASE. V.—Child, aged 8 years. Diphtheria. Found the child's mouth black as ink; diphtheria coating as thick as one-half the length of the uvula; pulse asthenic, and breath very putrid. This was the only child left in the family, and I considered the responsibility, the parents being willing to risk a change of doctors. I made a gargle of Tincture baptisia ʒj, Eucalyptus ʒiss., water ℥iv, to be used, a teaspoonful as a gargle every hour, and one-half teaspoonful taken alternately with the gargling. Also Tincture veratrum gtt. v, Aconite gtt. vij, water ℥iv. M. S. One teaspoonful every hour. Sharp vinegar applied to throat externally. Was to call again next day, but must confess I did not care about getting quite there until I heard the child was alive, and to my astonishment I found the mouth and throat as clean and natural in color as I could wish; tonsils somewhat swollen, but of natural color; pulse full and normal. Result, a good recovery.—A. M. WOODWARD, M.D., in "Southern Medical Record."

MORE ABOUT EUCALYPTUS.—An every-day use of the above article develops more and more its superior claims as one of the best, if not *the* best "antiseptic remedy" now known, and herein lies its power as a febrifuge, aided by the moderate "diaphoretic" property which it possesses.

Its effect in all grades of diphtheria is suddenly pronounced, in

changing the fetor of the breath, or the septic condition of the blood and other fluids of the system, *on which depends the severity of the disease,* and should be the first remedy given in this scourge of our country, and followed up until the system is thoroughly cleansed of every vestige of the "virus," used both as a gargle for the throat and posterior nares, and as an internal remedy. For gargle:

℞. Fl. Eucalyptus, ... ʒij.
Aq. Fontana, ... ʒiv.
Use q. s. every half hour or hour.
Internally, ℥j, aq. fon., ʒiv. Dose, one teaspoonful every hour.

Of course other remedies are necessary to fulfil different indications, as there are no two cases which require the same treatment, save the Eucalyptus, and as I am not writing an article on diphtheria, I shall not give them here.

In typhoid and malarial fevers, "Eucalyptus glob." is an indispensable remedy. A case I recently attended, of the worst malignant type, will show its power in counteracting the fermentation or putrescent condition in such cases.

When I entered the room where the patient lay, the putrid scent was unbearable, and the friends summoned to witness the final separation. Patient unable to utter an audible sound. I at once commenced the use of Eucalyptus, and in twelve hours you could perceive no putrid scent whatever, and with other appropriate remedies the patient recovered.

In putrid dysentery—child three years old—changed in six hours to healthy passages, and with Aconite, grs. v, aq. one-half goblet, and teaspoonful given every hour, the child was about the house in two days. When called the child was comatose and passages principally putrid blood.

In scarlatina it has the same salutary effect. Three cases in one family, recently treated by my partner, Dr. J. M. Mulholland, were changed from a malignant to a simple type in two days. From a putrid concentration to the throat to a healthy scarlet eruption on the whole surface.

As has been noticed in other articles its effect in unhealthy ulcers, as a wash and to administer internally, is well marked.

We are now using it in cases of gunshot wound of knee-joint

with the most favorable results, keeping down inflammation and producing a favorable termination. It acted like a charm, and recovered without inflammation and but *very little* suppuration.

I would add that in the cases treated by my partner, of scarlatina, there were no other remedies used except Aconite and Belladonna, in very minute doses.

℞. Tr. Aconite, Tr. Belladonna, āā, ... gtt. iij
Aqua, one tumblerful.
S. One teaspoonful every hour.

℞. Eucalyptus (fluid extract), ... gtt. xv
Aqua, one-half tumbler.
Use alternately in teaspoonful doses, and for gargle.

I would also add that we have had a very large number of cases of both diphtheria and scarlet fever within the past year, but of scarlatina we have lost none, diphtheria two, and those commenced in the lungs, filling the large bronchial tubes and trachea.

It is one of our best remedies in the type of fever which prevails this fall, called by some typho-malarial.—A. B. WOODWARD, M.D., in "Medical and Surgical Journal."

THERAPEUTICAL APPLICATIONS OF EUCALYPTUS GLOBULUS.—At the last meeting of the San Francisco Medical Society, Dr. Pigne Dupuytren said he had used Eucalyptus in the French hospital for a year, during which time many interesting results had been noted. In March last a hundred of the small trees had been planted on the hospital grounds. They had now reached the height of seven feet. He related the following cases:

A man had arteritis of the leg, succeeded by gangrene, which extended so high up as to render amputation impossible. In two weeks a large ulcer resulted, whose odor was horribly fetid. Everything in turn was employed to destroy this odor, to no effect. At last a decoction of Eucalyptus was resorted to, and, without exaggeration, in five minutes all fetor had disappeared. The decoction continued to be used with the same effect until death occurred, two or three weeks subsequently.

Another man, who had been under treatment in the hospital for two months, with extensive, deep ulcer from varix of a year's duration, had the decoction applied to the ulcer three times a day with remarkable effect. In five or six days the ulcer was entirely covered with healthy granulations, and in a month it was entirely well.

A woman had been troubled for many months with an ulcer around the ori-

fice of the urethra. It was cauterized five times with no result. After twelve days' use of the decoction of Eucalyptus, washing thrice daily, it was well.

Four cases of syphilitic chancres healed under the Eucalyptus dressing in five or six days, without other treatment. These were very recent cases, or constitutional treatment would have been resorted to.

He had but one case of intermittent fever to report. This had proved rebellious to Quinia, and also to Arsenic, which latter had been administered for two weeks. A three weeks' course of the Eucalyptus cured entirely.

So numerous were the cases of bronchitis cured with the drug that it was hardly worth while to mention them.—"Pacific Medical Journal."

EUCALYPTUS GLOBULUS.—Dr. Wooster, of San Francisco, California, submitted a report of 136 cases of various diseases treated exclusively with Fluid extract of eucalyptus globulus.

Remittent fever: cases treated, 5; cured, 5. Intermittent fever: cases treated, 19; cured, 19. Typhoid fever: cases treated, 9; cured, 9. Nephritis: cases treated, 4; cured, 3; improved, 1. Diuresis: cases treated, 10; cured, 7; improved, 3. Incontinence of urine: cases treated, 3; cured, 3. Vesical catarrh: cases treated, 27; cured, 25; improved, 2. Blennorrhagia: cases treated, 13; cured, 10; improved, 3. Valvular disease of heart: cases treated, 7; cured, 0; improved, 7. Dysentery: cases treated, 4; cured, 3; improved, 1. Chronic diarrhœa: cases treated, 13; cured, 9; improved, 4. Gonorrhœa (syphilitic): cases treated, 15; cured, 10; improved, 5. Dropsy: cases treated, 6; cured, 3; improved, 3. Of the whole number of cases, 106 were cured and 29 improved.

At a recent meeting of the San Francisco Medical Society, Dr. Stout exhibited an ingenious apparatus for the inhalation of medicated vapors. The medicated liquor is kept boiling by a spirit-lamp, and the vapor conducted through a tube. He has used the Eucalyptus in this way, employing the tincture in water. It was preferable to the common atomizer, because of the warm vapor, which is not only medicinal in itself, but promotive of absorption. The Eucalyptus he had found very beneficial in bronchial and pulmonic affections.

Dr. Pigne Dupuytren testified to the virtues of the remedy, which had been fully tested by himself and Dr. D. Oliveira, in the French hospital. It had been found highly serviceable in affections of the larynx and of the mucous membranes in general; also as a tonic. In France it was much used as a febrifuge, and by some considered a substitute for Cinchona. The leaves growing near the trunk of the tree were the most aromatic. A large number of the trees had been planted around the French hospital

for sanitary and medicinal purposes. The leaves, in drying, emitted a large amount of balsamic exhalations, capable of causing headache in persons much exposed to them, as he had experienced in his own house.—"Pacific Medical and Surgical Journal."

EUCALYPTUS GLOBULUS IN THE TREATMENT OF REMITTENT AND INTERMITTENT FEVERS.—Having seen but little written on the action of Eucalyptus globulus in the treatment of remitting and intermitting fevers, I thought I would give you a history of a few cases that I had been trying it in, in the last few months, for the benefit of your readers that have not had any experience in the use of it. The following is a brief history of the cases:

Mrs. V., aged 38, a farmer's wife, very much emaciated, having been suffering from intermittent fever for several months, which had assumed the double quotidian type. For the last ten days she was not able to be out of bed. The paroxysms came on regularly at 7 A.M. and 10 P.M., and were accompanied with very slight chilly sensation and some coldness of the feet, followed by very high fever and profuse perspiration. I gave her very large doses of Quinine without any effect; also gave Arsenite of potash with the same result. I then gave gtts. lx of Fluid extract eucalyptus every hour and a half, commencing in the sweating stage and continuing it until the time of the next paroxysm. She did not have any return of the attacks, and has continued well ever since.

Mr. P., aged 26, German, baker, had been treated for remitting fever for eight days by my friend, Dr. B., of this place, and he had been giving him very large doses of Quinine without interrupting the paroxysms. He became dissatisfied and sent for me. I gave him gtts. lx every hour and a half of Fluid extract eucalyptus, commencing during the sweating stage and continuing until he had six doses. He had no more fever, and commenced his usual occupation in a few days.

Mr. and Mrs. S., middle-aged, moved to this place from Port Jefferson, both suffering with intermittent fever. He had been laboring under the quartan type for eight months, and she had been troubled with the quotidian type for the last two years, more or less, and had had it for the last six weeks regularly. She was pregnant, seven months advanced, anæmic, with a sallow complexion, spleen very much enlarged, reaching about four inches below the free margin of the ribs. Before trying the Eucalyptus I gave xx of Quinia in the sweating stage, without any effect in either case. I then opened the bowels in both cases with Hydrarg. chlor. mit., and followed it with the usual doses of Eucalyptus; there has been no return of the disease in either case.

These experiments, although confined to a small number of cases, seem to show that there are cases in which Quinine proves inefficacious. In such cases it is important to possess a remedy that will answer, and I believe that Eucalyptus possesses that

power; and, besides, it does not cause those distressing head troubles that belong to Quinia, and it is not nearly so disagreeable to the taste.—T. B. TALBOT, M.D., Sidney, O., in the "Clinic."

EUCALYPTUS GLOBULUS.—M. Bucquoy, in the "Soc. Med. des Hôpitaux," gives a very flattering account of this remedy in certain pulmonary diseases. He says, in five cases of gangrene of the lung it was decidedly beneficial. Even in those of fatal termination it calmed the cough and diminished the fetid odor much better than Phenic acid. With one patient having the pleuro-pneumonic form, the use of Eucalyptus removed the gangrenous odor from the expectorated matter, caused the dyspnœa and cough to cease, but which reappeared as soon as its use was suspended. Notwithstanding a slight pleurisy and signs of a limited and superficial gangrenous evacuation, the patient was cured by the sixtieth day. Tincture of the fresh leaves of Eucalyptus, in doses of two grams, in a simple mucilaginous draught, or to which Syrup of poppies is added, was the form employed. When the depression of the forces was very marked, the preceding was alternated with Todd's draught, to which from two to four grams of Extract of cinchona was added.

Dr. Paul Boyce, in the "Virginia Medical Monthly," gives a case of ague and fever, which had been unsuccessfully treated with Quinia, Arsenic, etc., as cured in four days by taking of the Essence of eucalyptus (prepared from the oil distilled from the leaves) two drachms a day. He adds:

I believe we possess in the Eucalyptus a remedy not inferior to the Cinchona alkaloids. The oil applied to the nerve of a tooth soon destroys its sensitiveness and quiets the pain. In purulent catarrhal affections of the urethra *it acts like a charm.*—"New Preparations."

EUCALYPTUS IN DIPHTHERIA.—In cases of diphtheria, where there are dark-red and rough edges of the tongue, I mix "Baptisia" with the Eucalyptus. For children from two to five years old I prescribe:

℞. Fluid Extract Eucalyptus, . . . 20 drops.
Fluid Extract Baptisia, . . . 10 "
Aqua, one-half tumbler.
M., and give a teaspoonful every half hour.

This answers the place of a gargle, and also antidotes the "septic poison," which imprints the type of the disease. If the throat and roof of the mouth present a dark shiny red, I order Eucalyptus alternately with twenty drops of Tincture ferri chloride, Aqua, two-thirds of a tumbler; sweeten with good white sugar, giving a small sip every hour. If the pulse is sharp and quick, tongue white, with injected papillæ, Eucalyptus, alternated with Tincture aconite, five to seven drops, Aqua two-thirds of a tumbler-ful. If full and soft, or full and rather hard, Tincture veratrum viride, five to seven drops; Aqua, four ounces; sweeten, and give a teaspoonful every one-half or one hour.

The Eucalyptus is employed as an antiseptic remedy, and the Aconite and Veratrum viride as the "fever remedy," which is very much favored by the use of the Eucalyptus, not more than half the amount being required to produce the same amount of sudation, or diaphoresis, as is required without the Eucalyptus, and the reason is, in part, because the system is relieved of the poisonous irritant, which the Eucalyptus antidotes. It is preferable to Quinine in fevers, because Quinine is only an antidote to malarial poison, whereas Eucalyptus antidotes both malarial and animal poisons.

In cases of *typhoid* conditions Quinine *invariably* does harm by producing more excessive dryness of the tongue. Eucalyptus, on the contrary, moistens the tongue, and also destroys that peculiar septic odor which every practitioner at once recognizes in true typhoid conditions, if he has a trained nose. In diphtheria it also destroys the peculiar odor at once.

Myself and partner have had diphtheria and scarlet fever cases by the hundred since the middle of last April, and we have not failed to change malignant types into simple types in a very short time, and have stopped the putrid scent so often present within twelve hours. We have lost only one case (and that one was a case where early treatment was received from other parties), whose trachea was filled with diphtheritic exudations when it came into our hands. Eucalyptus will change malignant scarlatina to a simple type in twenty-four hours, if given and used rationally, with *Belladonna*, if this is necessary to relieve urgent congestion. Of

course the strength should be governed according to age and the urgency of the symptoms, all of which the true physician can see at once. We could give sufficient cases to fill a large volume, where Eucalyptus (if *a good article*) has positively changed *malignant conditions* to favorable conditions in a remarkably short space of time.

As a local application for ulcers and wounds it has *no equal*, and for suspicious leucorrhœal discharges it is one of the *best* articles; say one to two drachms in one-half pint of tepid water for vaginal injections, injecting it slowly; and for toning up vaginæ and weakened and prolapsed uteri there is no better remedy for vaginal injections than Eucalyptus, equal parts of Fluid extract eucalyptus and spice-bush leaves and bark used in the strength above mentioned.

Eucalyptus is not only an antiseptic, but is also a disinfectant. It only requires to be used once to prove this in cases of sloughing ulcers or retained placentæ. The main trouble, however, is in obtaining a good article.

Had I sufficient time I would give cases where we have used it alone in order to test its virtues, but suffice it to say that we do not see fit to be without it for a moment if we can help it; and we prefer the fluid extract made from the leaves of the Eucalyptus which grows in Australia, believing it to be as much superior to the Californian tree as the long Buchu leaves are superior to the short.

We also wish to bring to the notice of the profession the Fluid extract of spice-bush leaves and bark for vaginal enemas, in cases of prolapsed uteri and ulcerations of the os and vagina, leucorrhœa, etc.

We will give you some of our experience in the use of "Equisetum hyemale" as soon as convenient. The article grows here in abundance. It is almost a specific in congestion or clogging of the kidneys, and as such is an indispensable article.—A. B. WOODWARD, M.D., in "New Preparations."

EUCALYPTUS GLOBULUS IN PLEURISY.—Eucalyptus given in alternate doses with Grindelia robusta in tuberculosis or inflam-

matory condition of the lungs and pleura, is very efficacious, as I have found in a recent case, which I will report:

Mr. J. T., aged forty-five, of a sanguine, nervous temperament, was attacked about December 4th, 1877, with pleurisy and inflammation of the lungs. The lower lobe of the right side was the most affected; also the pleura, on same side was much affected. The inflammation of the lungs terminated in a large abscess or tubercle in lower lobe of right lung. He expectorated a pint of muco-purulent matter in the course of two hours, then the cough became easier, and the expectoration became less every day, and after two weeks from the time of attack he was convalescent. The attack was so severe that he could not lie down for forty-eight hours, and his feet and hands were very much swollen. The dyspnœa was labored and difficult; urine very high-colored. The bowels remained inactive as to the evacuation of their contents for ten days. I do not believe in evacuating the bowels unless there is some organic lesion. To give a cathartic early, to evacuate, is bad policy in any case of disease of the respiratory organs.

I treated the above case on general principles. I gave the Grindelia and Eucalyptus in half-drachm doses alternately every two to four hours for ten days, then gave it alternately every six hours for ten days. At the end of twenty-five days all cough and expectoration had ceased. For a week all who saw this case pronounced it a hopeless one, and that neither I nor any one else could cure him.

It was the worst case of the kind I have treated for the past twenty-eight years, and I think his recovery was due to the *alternate* effect of Eucalyptus and Grindelia. No blisters were applied to the affected parts in this case; I do not approve of blistering in any disease of the chest, because it only adds to the already existing irritation.

Grindelia seems to act as a non-irritant on the nerves of respiration; Eucalyptus acts principally upon the secretions, and carries off the deleterious matters of the system through the excretory organs, the spleen, the kidneys, and the skin. Its force is also spent on the mucous surfaces.—GEORGE W. MALLORY, M.D., Lowell, Michigan, in "New Preparations."

EUCALYPTUS GLOBULUS IN MALARIAL FEVER.—I report a case that came under my care last fall:

J. D. came under my care suffering with great anæmia, debility, night-sweats, etc. He had had various attacks of fever and chills. Had been given

Quinine and Cinchonidia until almost deaf and the brain and nervous system badly injured. The mineral acids had been used and the bromides to relieve the brain. He had very slight fever in the evening, yet he was very restless and delirious through the night. All the old remedies had been exhausted for good and even pushed to harm. His friends had despaired of recovery. I had just read "New Preparations," and put him on Eucalyptus, a teaspoonful of the fluid extract every four hours. Under its influence he slept well, the night-sweats stopped, and he made a rapid recovery.

I have used it in other cases with satisfaction. My experience proves it to be a good tonic, and it exerts a soothing anodyne influence on the nervous system. It seems to increase the efficacy of Quinine to control intermittents and to obviate some of the objectionable features of it. It also acts as a diuretic.—L. STANLEY, M.D., Fincastle, Indiana, in "New Preparations."

EUCALYPTUS IN DIPHTHERIA.—The accustomed reader of medical journals of the present day cannot well avoid noticing the unusual amount of matter now being written upon the subject of diphtheria. The conclusion would naturally arise, in such case, that this had become either a very common disease, or one about which there exists great difference of opinion. Whether the former or latter be the true solution, it must be the conceded duty of each one having such cases under his care to give his experience in the treatment, through the medical journals. So, in accordance with such convictions, I will offer my mode of treatment. During the past twelve months scarcely a family in this whole section of country has escaped this fearful disease. I have had as many as half a dozen cases in one house at the same time, and have used almost every form of treatment. During the prevalence of this epidemic, I have had under my charge about two hundred cases. I will give the particulars of only one case, which will fully illustrate the advantages of my mode of treatment.

March 16th, 1877, I was called to see a case, aged about eight years. I diagnosed at once a genuine case of diphtheria, and put him on the following, viz., Chlorate of potash, Sulphite soda, and Glycerin internally; also Sulphas quiniæ as a tonic and stimulant, and as a local application equal parts of Tincture iodine and Gly-

cerin. This plan I have found to succeed in a large majority of cases, but in the present case, in spite of my perseverance with the above course, in combination with other minor points, I was nonplussed to see my patient gradually growing worse. The membrane in the fauces, pharynx, and nares at this time was quite extensive; so at this juncture I concluded to make a change in the local treatment, which consisted in the substitution of Fluid extract eucalyptus globulus instead of Iodine and Glycerin. Imagine my wonderful surprise, on the first application of the Eucalyptus globulus, to see large flakes of membrane readily peel off, and the same result on each subsequent application; and in a few days I had the pleasure of seeing my little patient convalescent. Since using the Eucalyptus globulus in the above case I have tested its powers in quite a number of other cases, and can heartily recommend its use to others. In some cases I use it as a mop, with a soft piece of sponge, in others simply as a gargle.—J. E. MASSEY, M.D., in "The Medical and Surgical Reporter."

EUCALYPTUS AS A LOCAL ANÆSTHETIC.—Dr. Horton (Ohio State Dental Society) speaks of the Extract of eucalyptus as producing good results as a pain obtunder in sensitive dentine. A drop on a pledget of cotton is used. He thinks it the best of the local applications.—"Louisville Medical News."

EUCALYPTUS GLOBULUS IN MALARIAL NIGHTSWEATS.—During the last year I have used eucalyptus globulus with the most happy results in nightsweats, as the following cases show:

Last May Mrs. A. M. B—— came under my charge, very icterotic and emaciated from excessive nightsweats. Had been treated by a skilful physician with all the usual remedies that he could summon, but to no effect in mitigating her sufferings. I put her upon Eucalyptus globulus, one-drachm doses four times a day for two days; then three times a day for three days, with a remarkable change for the better. Then I made a tonic of Eucalyptus and simple elixir, equal parts, and ordered one teaspoonful four times a day. In two weeks' time the sweating had entirely ceased. She used the medicine one month, and was completely restored to her wonted health.

Frank H., who had been treated for ten months for chronic ague, icterotic, with

occasional nightsweats, was restored to health by first giving him one ounce of Warburg's tincture to break the chills; then following it up with half-drachm doses of Eucalyptus globulus, and two-drop doses of Fluid extract podophyllum every four hours during the day. Four ounces of fluid extract was alone sufficient, but to make sure he was all right I had this prescription duplicated.

Mr. Z. came to me in November, very pale and emaciated, suffering with chills, nightsweats, and splenitis. I ordered him to take one Podophyllin and Belladonna pill twice a day, and Eucalyptus globulus and simple elixir, equal parts, every three hours for three days, then every four hours for four days, then report to me. He had been treated by the physicians in our neighboring towns for five months with very little improvement. Said that "my medicine had done him more good in one week's time than all the medicine he had taken." He is now well.

I might go on and give a long list of the good results in my practice, but let this suffice.—W. L. REED, M.D., in "New Preparations."

EUCALYPTUS IN MEMBRANOUS CROUP.—Dr. Walcker claims to have had great success in the treatment of membranous croup, both in its primary form and in the form which he regards as secondary to diphtheria of the pharynx. He employs the Alcoholic tincture of eucalyptus globulus. Professor Gubler and Dr. Gimbert, of Cannes, have shown that Eucalyptol, the active principle of the Eucalyptus, has a special action on chronic catarrh, with muco-purulent secretion, especially when located in the lungs, and that the resinous principle is chiefly eliminated through these organs. Dr. Walcker employed it with benefit in doses of from two and a half to five drachms per diem in cases of chronic bronchitis, in old people, and in a case of pulmonary gangrene that recovered. He then tried it in several cases of croup, and it succeeded beyond his expectations. In one case the cast of the entire trachea and of the first and second bronchial bifurcations was coughed up, and the patient, a child of five years of age, recovered. He has now discarded local applications, and orders an ounce of the Tincture of eucalyptus with three ounces of syrup, a teaspoonful of the mixture being given every hour. The children take it readily, and if given slowly any diseased part in the pharynx will be sufficiently impregnated with the medicament. A mild emetic of Ipecac. is given occasionally, if the patient be strong enough to bear

it. Cold drinks are given to relieve thirst, and cold applications are made to the head if there is much congestion. The child's strength is to be kept up by proper nourishment; the alcohol contained in the above mixture is serviceable in this connection. Dr. Walcker has given five drachms and more of the Tincture of eucalyptus per diem to a child five years of age, and has never known any bad symptoms to be produced by it. Dr. Siegen thinks that it is indicated in all febrile affections of the respiratory organs, and especially in whooping-cough.—"Gazette Médicale de Strasbourg," February 1st, 1877.

EUCALYPTUS IN UTERINE LEUCORRHŒA.—In his "Clinical Studies," Sir John Rose Cormack makes some remarks upon a therapeutical agent but little known in this country, viz., the Eucalyptus globulus. In simple uterine catarrh Sir John says that he does not know of any remedy equal in value to preparations of this plant. "In such cases," he continues, "I have several times, with most satisfactory results, simultaneously administered them by the stomach and in the form of injections. As Gubler has shown, the anticatarrhal virtues of Eucalyptus are most remarkable. With increasing experience of its power, I more and more employ it in bronchial, vesical, and uterine catarrh, in gonorrhœa, and in gleet." An infusion (half an ounce to two pints), or a tincture (one ounce to a pint of rectified spirit) of the leaves, or the essential oil given in capsules, are the preparations ordinarily employed. As a gargle or vaginal injection, and for external application, the infusion, or the tincture diluted (one drachm to six or eight ounces of cold or tepid water), may be used. Besides these therapeutic uses of the Eucalyptus, the author adds his very favorable experience of its remarkable power of destroying the fetid odor of morbid discharges *without the substitution of another unpleasant smell.* He speaks from an extensive trial of Eucalyptus lotions in horribly offensive discharges in cases of ozæna, cancer of the tongue and throat, cancer of the uterus, gangrene, and other affections attended by fetor.—"Medical and Surgical Reporter."

EUCALYPTUS AS AN ANTIPERIODIC.—The wonderful effects reported of the hygienic and therapeutical power of this Australian tree have been published within the last four years in the "Circular," as new facts were recorded in medical literature. Even the growing tree appears to be capable of counteracting those atmospheric conditions which develop intermittent fevers in such particular localities as come to be known as *aguish districts;* and preparations of the bark and leaves are said to be powerful antidotes, when internally administered, to persons poisoned with the specific malaria. The following report of two cases seems to be authentic, and strengthens others that have been noticed in back volumes. Two instances are cited by Dr. Curnow, of London, of the cure of intermittent fever by the use of tincture of *Eucalyptus globulus.* We give in full the author's account of one of these cases, as sufficiently illustrating the action of the drug:

S. S——, aged eighteen, a Norwegian, was admitted to King's College Hospital May 23d, 1876. He had been suffering from intermittent fever for four or five weeks. The attacks were moderately severe and of a well-marked tertian type. An expectant plan of treatment was pursued until June 9th, and during this period the paroxysms recurred on alternate days with the utmost regularity. They began at 10 A.M., reached their acme between 1.30 and 3 P.M., and passed off about 6 P.M. The highest temperature varied from 104.8° to 105.6°. On June 9th the tincture of the *Eucalyptus globulus* was given in one-drachm doses three times daily. The next day, on which another attack was due, his temperature rose to 100°, and on the 12th to 100.4°; after this date no further paroxysms occurred during the remainder of his stay in the hospital.—"Druggists' Circular."

THE SANITARY INFLUENCE OF THE EUCALYPTUS.—We learn from the "Meteorological Magazine" that at the Easter reunion at the Sorbonne some information was given by Dr. de Pietra Santra, a delegate from the Climatological Society of Algiers, as to the results of an investigation made in Algeria to ascertain the importance and value of the *Eucalyptus globulus* in relation to public health. It appears that reports were received from fifty localities, where the aggregate number of blue gum trees is nearly one million, and from these reports the following conclusions have been drawn:

(1) It is incontestably proved that the Eucalyptus possesses

sanitary influence; for, (2) wherever it has been cultivated intermittent fever has considerably decreased, both in intensity and in frequency; and, (3) marshy and uncultivated lands have thus been rendered healthy and quite transformed. Similar results have been obtained in Corsica, where it is computed that at the end of the present year there will be upwards of 600,000 plants of Eucalyptus in full growth.—"Druggists' Circular."

EUCALYPTUS.—Moderate doses cause a disturbance of the digestion, sometimes succeeded by a diarrhœa, in which the motions, like the eructations, recall the smell of the Eucalyptus. Large doses sometimes cause headache, excitement, and fever, with accelerated respiration, thirst, sickness, and, generally, sleepiness; upon anæmic persons, however, it acts as a narcotic. The symptoms rarely last more than a few hours.

"In Australia the Eucalyptus globulus is the popular remedy for fevers, and in Europe it has been used successfully in the treatment of diseases prevalent in marshy districts. M. Gubler quotes the testimony of several medical practitioners who say that it produces marvellous results in cases of intermittent fevers, especially obstinate ones, where Sulphate of quinine has been used without effect."—"Phar. Jour. and Trans.," March 2d, 1872.

It has been recommended for and used with marked success as a disinfectant in dressing wounds, ulcers, purulent catarrhal affections of the urethra and vagina, fetid breath, and as an astringent to harden spongy and bleeding gums.—"New Preparations."

EUCALYPTUS IN ALBUMINURIA.—My experience with Eucalyptus globulus has not been very extensive, but I have a case that I will report:

Mrs. A——, aged thirty-five, called me to see her, January 1st, 1877. I found her anasarcal, urine scanty and high-colored, and upon testing it I found albumen in abundance. She had been under the treatment of another physician for eight weeks without any benefit. I, after making an examination, prescribed Eucalyptus globulus fl. ext. ℥j, ten drops, three times a day, to be taken on empty stomach. Her digestion being bad, I ordered Lactopeptine in five-grain doses. The treatment was continued for eight weeks, the dropsy gradually decreasing, and now, after eight months, shows no signs of returning. She is enjoying a moderate degree of health.—A. P. MURRAY, M.D., in "New Preparations."

EUCALYPTUS GLOBULUS IN PULMONARY GANGRENE.—Of all the drugs employed by Dr. Bucquoy (of Cochin Hospital, Paris) in pulmonary gangrene, none, he asserts, have given him better results than Eucalyptus globulus. He used it in the form of an alcoholate, two grams (half a drachm) daily, in a mixture of water, gum, orange-flower water, and syrup. Out of the various cases he had under his care at Cochin five ended in cure, whilst in all the others there was a favorable modification of the odor of the breath, the sputa, and the violent cough, after Carbolic acid had failed.—"Lancet."

THE EUCALYPTUS AS AN INSECTIFUGE.—According to the "Garden," the placing of a young plant of Eucalyptus in a bedroom infested with mosquitoes has been found sufficient to cause the disappearance of the insects.

MEDICINAL POWER OF EUCALYPTUS.—Dr. David Wooster calls attention ("Pacific Medical and Surgical Journal," May, 1872) to the effects of the fluid extract of the Eucalyptus. He states that he has "used some gallons of it during a period of eight months in the United States Marine Hospital, and was surprised at its uniform and reliable effects in affections for which it is suitable." It is a diuretic of rare virtue, and may be administered when most of the diuretics now in common use are inadmissible. It is an aromatic tonic, and has notable restorative effects in low states of the system, as in typhoid fever, typhoid diarrhœa, and dysentery.

In vesical catarrh it alone cures. In spasmodic stricture it relieves with great promptness. In all affections of the mucous membranes its beneficial action is remarkable. We have treated many cases of acute gonorrhœa with no other remedy. *Per contra*, in syphilis it is useless except as an alterative.

It has no antiperiodic action. It relieves headache apparently as the saline diuretics do, by diuretic action.

As an external application in chronic ulcers it has great value.

It does not impair but rather improves the appetite.

EUCALYPTUS LEAVES.—The Rev. M. J. Berkeley mentions in the "Gardeners' Chronicle," on the authority of a letter received from Cannes, that Dr. Gimbert has introduced a new method of dressing wounds by using Eucalyptus leaves in the place of lint. The leaves, which have a "catty" smell, are merely laid on the wounds. The balsamic nature of them not only cures, but after a few hours all the unpleasant odor of the matter ceases.

EUONYMUS ATROPURPUREUS.

This indigenous remedy—commonly known by the Indian name of *Wahoo*, and by the common name of Burning bush—has not been sufficiently studied. It has been exceedingly popular as a domestic remedy, and a nostrum called "Wahoo Bitters" once had a high reputation for the cure of ague. Whether it possesses any antiperiodic power has never been accurately determined. I am inclined to class it with Chelone, Eupatorium perf., and others of a similar nature, whose specific virtues can only be known through careful provings.

From the few pathogenetic symptoms which have come under my observation, I will predict its value in *intermittent fever*, attended, as is common in certain seasons, by *exhausting diarrhœa*. It is certainly homœopathic to attacks of diarrhœa similar in character to *cholera morbus*, for it causes violent, profuse evacuations, with excessive *tormina*, much flatus, cold sweats, prostration, deathlike nausea, and vomiting, with chills. (See Symptomatology.)

Since the above was written some very interesting experiments have been made with Euonomin, the active principle of this drug. These experiments were made by some English physicians, and published in the "British Medical Journal." They decide that,

Euonymin is a hepatic stimulant in man as it is in the dog. Two grains of it, made into a pill with confection of roses, and taken at night, seem to be as efficient a remedy as Iridin. If the dose be not too great it leaves no depression. As it is a feeble intestinal stimulant, it is well to follow it in the morning by a

dose of Pullna water or other saline aperient. I have been much struck with the success of Euonymin in functional hepatic derangements in several persons who have tried nearly all the commonly used cholagogues with varying and limited success. I have no doubt that in consequence of our experiments Euonymin will come to be a universally employed hepatic stimulant.

Dr. Paine, in his work on "Concentrated Medicines," written many years before the above experiments, says, that in a proving on himself, "half a drachm caused nausea, vomiting, purging, and bilious discharges from the bowels." He pronounced it the best hepatic stimulant in use.

Dr. Paine declares it will cure *diseases of the bones* by its general effects on the lime; that it arouses the action of the pancreas and increases the secretion of the gastric juice.

I have used it extensively of late in hepatic derangements, giving small doses (3^{x} trituration) in excessive secretion of bile, and the 1^{x} trituration in deficiency.

Dr. Holcombe has read the above experiments to advantage, for he reports the following experience of Euonymin in albuminuria:

CASE I.—I made last winter a clinical discovery which promises to be one of considerable importance. I had been prescribing occasionally during the past year for a young gentleman afflicted with dyspepsia, chronic catarrh, and sick headaches. The latter symptom had become especially annoying, and one evening, while engaged in social converse, his head slightly aching, my patient fell into a violent and prolonged convulsion, followed by stupor and headache for some hours. The next day I analyzed his urine, and found it loaded with albumen; indeed the albuminous deposit occupied more than one-half the space which was at first occupied by the urine alone. I thus discovered that an insidious Bright's disease was at the bottom of all his troubles.

I treated him for three months with various remedies. Helonias, Macrotin, Mercurius corros., Arsenicum, Gelsemium, Aurum, and the Phosphate of strychnia, and Iron figured successively or alternately in the management of the case. He was sometimes better and sometimes worse, hardly ever free from headache, and the urine never absolutely clear of albumen. The severer the headache, the more heavily was the urine loaded with albumen. I could not see that my remedies had made any serious impression on the case, and I was very much disheartened. He was pale, anæmic, thinner in flesh, low-spirited, and I felt confident that unless more efficient remedies were given he would have more convulsions.

About this time I happened to read in an allopathic journal of some experiments made upon dogs with Calomel, Podophyllin, and Euonymin, to ascertain their relative value as cholagogue purgatives. It was asserted that Euonymin

was far superior to the others for exciting a free flow of bile. Regarding dyspepsia and arrested or perverted hepatic function as morbid steps almost always preliminary to the development of Bright's disease, I had determined to put my patient steadily for awhile on a liver remedy, and it occurred to me soon that I had discovered the right thing. I gave him two or three grains of the 1st cent. trituration of Euonymin, three times a day.

At the expiration of a week he reported himself as free from headache, and in every respect better. To my surprise, as well as delight, there was not a particle of albumen in his urine. Another week of the same treatment and the same favorable report was made. I gave him a placebo during the next week, and he came back complaining of rheumatic pains all over. I gave him Macrotin, and on his next weekly visit he had severe headache, no appetite, nausea, and strongly albuminous urine. I returned to the Euonymin and the urine became normal in a few days. I continued the Euonymin steadily for two or three months, and the patient improved regularly. He fattened ten pounds, had very little headache or dyspepsia, and the urine continued perfectly free from albumen. As he had not made a satisfactory change of climate for many years, I advised him to visit Waukesha and drink moderately of the Bethesda water during the summer. He has been there six weeks at the present writing (August), and reports himself in excellent condition.

CASE II.—Very soon after discovering that Euonymin caused the disappearance of albumen in the above case, I tried it upon another. A tall, very thin young gentleman had been visiting my office for more than a year, complaining of pains in the back and head. He was slightly dyspeptic and always low-spirited and despondent. His urine contained albumen in very small quantities at every analysis, and Strychnia was the only remedy I gave him which caused its disappearance for even a short time. I prescribed the Euonymin, and in a couple of weeks no albumen was to be found. Now, after four months, using it only occasionally, he has gained considerably in flesh, has no pains anywhere, and the urine is perfectly normal.

The two above cases given are very suggestive, and although it would be premature to claim Euonymin as a great remedy for Bright's disease, it is certainly one worth the earnest attention of the profession. I have frequently prescribed it successfully for pains in the back, loins, hepatic and splenic regions, of obscure origin, but very probably connected with kidney troubles not revealed by the exudation of albumen.

EUPATORIUM AROMATICUM.

The late Dr. B. L. Hill once recommended this plant as a specific in *aphthous stomatitis* in women and children; also for the *burning in the stomach* with "nursing sore mouth," before and after confinement.

A few physicians, acting on his recommendation, claim to have used it successfully. The eclectics speak highly of it as a *nervine*, classing it with Scutellaria and Cypripedium, alleging that it removes *restlessness and morbid watchfulness*, morbid irritability of the nervous system, tremors, jactitations, chorea and hysteria. No provings have been made. When you meet with cases of *aphthous disease*, concomitant with *nervous erethism*, it will afford you good opportunity to test its value. It is used as a wash, as well as internally.

EUPATORIUM PERFOLIATUM.

This plant, common to all parts of this country, grows in wet, marshy places, and seems to bear out the supposition of some medical writers, that certain plants are specially adapted to the treatment of the maladies which are prevalent in the localities inhabited by them. The *Boneset*—so called by the common people on account of its virtues in fevers characterized by severe aching pains, apparently in the bones—has been extensively used in this country, from its earliest settlement.

Its sphere of action appears to include the *gastro-hepatic system*, the *muscular* or *fibrous tissues*, and the *bronchial mucous membranes*. Its congeners are Arnica, Baptisia, Bryonia, Ipecac., Mercurius, Podophyllum, Phytolacca, and perhaps Chelidonium and Cimicifuga.

Introduced into homœopathy by such veterans as Jeanes, Neidhard, and Williamson, it has been used for nearly the same diseases for which it was recommended by Rafinesque fifty years ago, namely, intermittent and remittent fevers, petechial or spotted fevers, rheumatism, influenza, and diseases of the liver.

In *intermittent* and *remittent fevers* it has always been a favorite remedy, and its characteristic indications are well marked, and may be briefly stated as follows:

The *chill* is nearly always in the *morning*, and is preceded for several hours by *thirst*, soreness, and aching in the bones (apparently). The thirst continues during the chill and heat. The chill is attended by nausea, vomiting of bile, intense aching, and soreness in the flesh of the extremities, and often all over the body. These symptoms continue during the heat, especially the vomiting, which was often painful and incessant, so that nothing can be retained in the stomach.

The *heat* is apt to be prolonged until evening or into the night, and may be followed or not by *sweat* (with chilliness). If no sweating occurs the apyrexia is short, and attended by chilliness, nausea, thirst, and debility, showing that the febrile action never altogether subsides, giving us a true type of

Remittent fever—a fever in which the *Boneset* is often our best remedy, especially if occurring in the summer and autumn, and is attended by very severe bilious symptoms. This fever goes by the various names of "bilious remittent," "gastric remittent," and even "bilious rheumatic" fever.

It matters not much what the epidemic is called, if you find the characteristics of the remedy—the "aching in the bones," the soreness of the muscles, the bilious vomiting, etc.—you will be successful in its use if you prescribe the lowest dilutions, or even the infusion of the plant, to be taken through the apyrexia and paroxysm.

Cerebro-spinal fever is said to have been cured by this remedy, but I doubt its value in cases when the cord or meninges are the seat of inflammation. You will meet with many cases of malarial fever, sometimes occurring epidemically, where the symptoms closely resemble true cerebro-spinal meningitis; but a close study of such cases will convince you that the similarity is only apparent. The *vomiting*, instead of being due to cerebral irritation, is of *hepatic* origin; the intense pain and soreness in the head, back, and all over the body is due to the action of malarial poison and not to spinal congestion. I do not deny, however,

that the poison of marsh-malaria may not cause actual cerebro-spinal irritation and congestion; but what I want to impress upon your memory is this, that the *cause* of such symptoms must be taken into account. Although Eupatorium perf. causes symptoms very similar to cerebro-spinal fever, it will not cure them unless caused by marsh miasma. True epidemic "spotted fever" is a disease rarely sporadic, generally epidemic, and occurs usually in the winter or early spring, and requires such remedies as Secale, Cannabis indica, Calabar, Solanum, and Veratrum viride.

Cerebro-spinal symptoms due to malaria occur at a time when agues abound, in the summer and autumn, and are best treated by Eupatorium perf., Eucalyptus, China (Quinia), and a few other medicines.

A severe form of *fever*, generally epidemic, has been known on several occasions in our Western States, characterized by *profuse perspiration, without mitigation of the heat, pain in the bones,* and other sufferings. This "sweating fever" has been cured by appreciable doses of the tincture or infusion of this plant.

Catarrhal fever, or epidemic influenza, when attended by the peculiar pains and other symptoms of Boneset, but having in addition intense bronchial irritation with severe cough, has been treated successfully with it.

In all these fevers, and even in the beginnings of *typhoids*, the Eupatorium is looked upon as a specific by the country people. They always give it in infusion, a small quantity of the leaves (℥ij, or iv) in a quart of water. If there is *no* vomiting, it is given in a warm infusion, which causes vomiting, which is not considered a bad symptom when caused by the remedy. If much vomiting and gastric irritation is present it is given *cold*, when it allays and arrests it.

When practicing in malarious districts, you will observe, as I often have, that the Boneset macerated in whiskey is generally recommended and used as a preventive of "fever and ague." I can testify from my own personal experience, that a few drops of the tincture, taken several times daily, is an excellent prophylactic to prevent the return of intermittents and bilious remittents.

The *headaches* of Eupatorium are in keeping with the general

character of the medicine. They are such headaches as are caused by hepatic derangement. Some persons are subject to attacks which they call *bilious sick-headaches*, in which vomiting of bile constitutes the principal symptom. The headaches usually come on in the morning, preceded by thirst and chilliness; the pain is in the top and back part of the head. We usually give Nux and Bryonia in such cases, but you will often find this remedy curative when the former fail. It has one kind of headache which is identical with that of Chelidonium, namely, "Pain in the occiput after lying, with sensation of great weight in that part, requiring the hands to lift it." Bilious subjects often wake with this sensation, and it is apt to be followed by a distressing headache all day. Either remedy will cure such headaches, but the Chelidonium has more marked symptoms of *jaundice* than Eupatorium.

Headache with pain and soreness in the eyeballs indicates this remedy.

Congestion of the liver, with an oppressive feeling of soreness, fulness and tightness in the hepatic region, yellow tongue, cough, vomiting and purging of bile, indicates this remedy. Small doses will cure, because the above are primary symptoms of the drug.

You may occasionally find it useful in ordinary *bilious vomiting and diarrhœa* of adults and children. In such cases, when closely indicated, the higher dilutions may act favorably.

The *catarrhal symptoms* of Eupatorium are quite notable. It has cured "nocturnal loose cough," "hoarse, rough cough with scraping in the bronchia," "violent cough with soreness in the chest," "cough with flushed face and tearful eyes—the patient supports the chest with his hands," "coughs with soreness and heat in the bronchia," etc. The cough resembles those of Phosphorus, Bryonia, and Sticta. I would suggest its usefulness in those coughs called "liver-coughs," which undoubtedly owe their origin to derangement of that organ. Generally, however, the coughs of Eupatorium are connected with other symptoms indicating that remedy.

It is said to have cured *asthma* and *bronchitis with great dyspnœa*, but I have never used it in such cases.

Although Dr. Williamson recommends it in rheumatic, gouty,

and even dropsical affections, I doubt its adaptability to such conditions.

Be careful to distinguish this medicine from another belonging to the same genus of plants, the Eupatorium *purpureum*, for the two are quite different in their action.

EUPATORIUM PURPUREUM.

This species, commonly known under the name of "Queen of the Meadow," does not resemble the Eupatorium perfoliatum, except in its curative properties in *intermittent fever*. The symptoms indicating it in ague are: "Paroxysms at various times of the day; *chills beginning in the small of the back, spreading up and down the trunk and extremities;* lips and nails blue; violent shaking with comparatively little coldness; fever, with nausea and vomiting, followed by moisture not amounting to sweat, principally about the head and forehead; any attempt to change position ever so little, during the sweat, a chilliness would pass through the body."

Many of these symptoms, you will observe, are similar to the *Boneset*. How the medicine happened to be used in ague I do not know. The symptoms are not found in the provings. It may have been by accident that its curative powers in ague were discovered.

Its proper analogues are Apocynum cannabinum, Asclepias syriaca, Cannabis, Senecio, etc.

Its sphere of action appears to include the urinary and genital organs, the muscular system, and the mind.

The symptoms of the urinary organs are very important. It causes primarily very profuse urination, very frequent, with deep, dull pain in the kidneys; cutting pains in the kidneys; constant urging to urinate all day, with cutting, aching pain in the bladder. The urine was clear, limpid, and of low specific gravity.

The secondary symptoms were scanty, but very frequent urination, with very intense smarting and burning in the bladder and urethra. The urine was higher colored and of greater specific gravity.

It has always had a great reputation among the people (who

call it gravel-root) as a remedy for painful affections of the urinary organs and dropsy.

Eclectic physicians use it in *irritable bladder, diabetes insipidus, incontinence of urine,* and in *calculous affections.* The provings verify the trustworthiness of its reputation, and add another proof of the truth of the law of Similia.

I have used it successfully in *calcareous concretions in the bladder and kidneys;* in *diabetes insipidus* (it may prove useful in glycosuria); in *dysuria, enuresis nocturna,* and other conditions of irritation of the bladder from direct or reflex causes. In *dropsy,* it has been used quite successfully by many homœopathic physicians. The dropsy in which it will prove curative will be found, generally, to be a secondary condition, preceded by undue excitation of the kidneys, which after a time gives way to the opposite condition of torpor or passive congestion. In this respect it closely resembles Apoc. cann.

It appears to have some specific action on the generative organs, but the precise nature of such action is not yet determined.

It is claimed that it has cured *impotency.* Impotency is a frequent concomitant of diabetes, and the two conditions may jointly indicate this remedy.

It is also claimed that Eupatorium purpureum is indicated in *sterility, threatened miscarriage, habitual abortion, ovarian* and *uterine atony, inefficient labor-pains, amenorrhœa* and *dysmenorrhœa,* and as a general "*uterine tonic.*" I have not used it very extensively in uterine affections, but its similarity in effect to Cimicifuga, Helonias, Caulophyllum, and especially to Helonias, would make it advisable for you to try it when those remedies fail.

Among its symptoms of the sensorium is a persistent sensation, "*as if falling to the left,*" with a "dizzy feeling all over." It causes also a feeling of "homesickness," although the prover was in her own house. A general hysterical, low-spirited state was also present.

The *dose* in diabetic affections or the nervous disorders should be in the third attenuation; while in dropsy, gravel, inflammations and congestions of the urinary organs, and atonic conditions

of the organs of generation, lower dilutions may be used, and in some cases the infusion.

EUPHORBIA COROLLATA.

This is an indigenous species of Spurge, possessing properties similar to those of the Euphorbia officinalis of Europe. In our older Materia Medica you will find a very good pathogenesis of the latter, which will give you a good idea of the character of both.

This indigenous specific is, however, much milder than the foreign. The juice of the latter will produce painful vesications on the skin and mucous membrane, while the former rarely if ever affects the skin as severely, even when the juice is applied topically.

The sphere of action of Euphorbia is on the mucous membrane of the intestinal canal, which it affects in a manner similar to Croton tiglium, Elaterium, Jalapa, Helleborus niger, and Veratrum album.

Large doses of the root or its tincture produce great nausea, profuse vomiting, followed by diarrhœa of serous, watery fluid, with painful colic, great prostration, cold sweat, fainting, cramps, etc., affording us a good picture of such diseases as *cholera*, *cholera morbus*, *cholera infantum*, etc., in which diseases I have used it as successfully in many cases as I have its analogues. It acts well in such colliquative discharges when given in the 3^x to 6^x dilutions.

So profuse are the watery evacuations caused by this drug that the eclectics call it a "hydragogue cathartic," and use it in dropsy to run off the serum through the bowels, just as Elaterium is used by the allopathic school, and in rare cases by our own school.

I would recommend you to give it a trial in *irritable stomach*, *profuse watery vomiting*, *colliquative diarrhœa in typhoids and of consumptives*.

The ultimate primary effects of Euphorbia, after the watery diarrhœa has ended, is to cause *mucous enteritis with tormina, mucous and bloody stools with tenesmus*. In my second edition of "New

Remedies" I suggested its use in *dysentery* when the symptoms corresponded, namely, when the dysenteric evacuations had been preceded by vomiting and diarrhœa similar to that caused by the drug. Since then several physicians have used it with good results in that variety of dysentery. Some epidemics of dysentery, both in adults and children, commence with attacks of cholera morbus or cholera infantum, and "run into" dysentery.

Naturally enough it shows the inevitable influence of a natural law; we find that the eclectic physicians recommend it in "cholera infantum, diarrhœa, and dysentery." They try to avoid the truth by asserting that it cures "by giving tone to the action of the secretory vessels." How contemptible are such subterfuges! How much nobler would it be to admit the truth of the law of *Similia!*

I wish to call your attention to the similarity of the action of Spurge to some epidemics of summer diarrhœa, when previous to the attack the child or adult has an *eruption of small watery vesicles with redness of the skin.* It has been observed that if the eruption suddenly recedes, *choleraic evacuations occur.* Now this remedy may be quite homœopathic to such cases, as is Croton tiglium. If the eruption had been like urticaria, Apis or Arsenicum are indicated; if papular, Pulsatilla or Dulcamara.

I have found it beneficial in a few cases of *gastritis,* with burning in the throat and stomach.

It is also indicated in that peculiar form of *gastro-enteric irritation,* when the slightest cold or indiscretion in diet results in vomiting of water or food, diarrhœa of undigested matters and water, followed by bloating of the abdomen and constipation. In the latter disorder the remedy should be given persistently for several weeks, in order to effect a radical cure.

Another species, the *Euphorbium hypericifolia,* has been used very successfully in *epidemic dysentery* when the discharges were very bloody. It has generally been given in weak infusions. I suggest that you give it a trial in the lower dilutions.

EUPHORBIA HYPERICIFOLIA.

In Volume I of the fourth edition of "New Remedies" I mentioned this indigenous medicine as a remedy for dysentery. I

have had no experience with it, except in one instance, when I gave it in a bad case of *infantile dysentery*. It seemed to have a good effect, but as we have no symptoms to indicate it I did not feel like giving it a further trial.

Dr. True has given us a few pathogenetic symptoms, which may throw some light on its action. He drank one and a half pints of an infusion, made by infusing half an ounce of the dried mature plant in a pint of water, and shortly after he says:

I experienced a sensation of fulness in the frontal part of the head, and also through the lateral portions, with headache similar to that produced with Macrotys (Cimicifuga), *but not so severe. The pain seemed to centre at the crown of the head*, but there was *a feeling of heat above the eyes* that was very characteristic. There was no ringing in the ears or vertigo, but the real symptoms were of that degree of positiveness that *it was with difficulty I could fix my mind on anything else but the headache.* The maximum of the feeling was in about two hours after taking the medicine, and it subsided in about three and one half hours, and was *succeeded by a feeling of languor and drowsiness*, which lasted several hours, but no sleep was produced by it. While the head symptoms existed there was a feeling of unpleasant fulness and oppression at the epigastrium, and I was compelled to take physic the second day for the constipation it had caused.

Dr. True states that this epigastric oppression was not due to the bulk of the infusion drunk, because he got the same symptoms from two drachms of the tincture. He very correctly thinks the drug is a *cerebral stimulant*. He considers it "secondarily sedative to the brain and sympathetic nervous system," which may or may not be the case. It would seem that it causes congestion of the stomach and liver or portal system at the same time that it congests the brain. This congestion is not active like that of Belladonna, but more like Cimicifuga or Chelidonium. It is evidently very different in its action from *E. corollata* or *E. officinalis*, for they are primarily active hydragogue cathartics. The primary effect of this specific seems to cause a torpid congestion, perhaps venous stasis of the abdominal viscera, with constipation. It is, probably, primarily indicated in dysentery, which has been preceded by constipation; and, secondarily, for passive or chronic watery diarrhœa.

Dr. True claims to have cured many cases of *cholera infantum*, but I should not dare to try it in acute cases for fear it might pre-

cipitate cerebral congestion, which it evidently did in one of Dr. True's cases, which ended fatally.

In the lower dilutions I predict it will prove a valuable remedy in actual or impending dysentery, with the symptoms I have italicized above in Dr. True's proving.

Dr. True incidentally mentions that this plant is a valuable remedy in *gonorrhœa*. He says: "The tincture as an injection in gonorrhœa beats anything I ever saw." He prescribes an injection of the tincture made with dilute alcohol, and orders it used "full strength." He claims to cure the disease in a week! One wonders what would be the effect of using the dilute alcohol without the Euphorbia? Perhaps it would cure as quickly. The proper method of testing the virtues of this plant in gonorrhœa would be to order injections of the *infusion*.

This plant evidently deserves further investigation, both by provings and cautious clinical experimentation.

FAGOPYRUM ESCULENTUM.

This medicine is prepared from the stems and seed-shells of the common Buckwheat. It has long been a popular belief that the eating of buckwheat cakes was a prolific cause of a definite eruption on the skin. It is supposed that in some way it sets up an irritation in the skin by changing the character of the blood. Many physicians coincide in this opinion, and it has been suggested by some practitioners of our school that the medicinal principle in this plant acted in the same manner as do the antipsorics, and that it would prove to be a remedy of that class.

Provings have been recently made of the tincture in various potencies. They were first published in the "Transactions of the American Institute." From these I have had compiled a *résumé*, which you will find in the first volume.

Many of the symptoms are certainly suggestive of some specific action, not only on the skin but on the mucous surfaces. I have not used it much in practice, but it is certainly indicated in *intertrigo, erythema,* and some forms of *eczema*, in which you may find it curative.

FERROCYANURET OF POTASSIUM.

This compound salt is quite innocuous in comparison with the *Cyanide of potash*, with which you must be careful not to confound it.

Its action has been but little studied in our school, while the eclectics have been using it largely for many years. It is a little singular that it can be given in doses of ten or fifteen grains several times a day without causing any poisonous effects, while the *Cyanuret* in doses of one-sixtieth of a grain will cause very unpleasant effects. It is said that the *Ferrocyanuret* is carried off so rapidly by the urine that the system does not absorb sufficient to cause deleterious effects. But this is not a good reason. We must look in some other direction for an explanation of this seeming anomaly. I think the Hydrocyanic acid forms, with the iron, a compound which resists disintegration to such an extent that only an infinitesimal quantity of the acid is liberated.

The pathogenetic effects of large doses of the Ferrocyanuret, so far as observed, are "giddiness, debility, non-fetid salivation, with ulceration of the mouth." It lessens the force and rapidity of the heart's action, and decreases the heat of the body. It is said to temporarily destroy all sexual desire and power. From these symptoms, and its effects in disease, we should place it as an analogue of the Bromides, Prunus, Laurocerasus, Lycopus, Digitalis, etc.

It bids fair to become an important remedy, especially in *diseases of the nervous system and the heart.*

Dr. Towne, in giving his experience with this remedy, says that he has used it with the greatest benefit in females, especially of enfeebled constitution, relaxed fibre, *feeble digestion, sour stomach with flatulence, sleeplessness,* and other symptoms attending such states of the system, such as pains in the head, stomach, bowels, back, etc. The *pulse is feeble, irritable, easily excited, and seldom regular for any length of time; the hands and feet more or less inclined to be cold.*

This is just the class of cases in which we would naturally suppose it to be homœopathic, as it doubtless is.

It is said to be very useful for the *sufferings due to excessive lactation.* Such cases present symptoms much like those mentioned above.

Headaches of a purely nervous character, depending on an impoverished state of the blood, are greatly benefited by this medicine.

"Cases of pure *neuralgia*," says Dr. Towne, "not depending on decayed teeth or organic lesions, are usually promptly relieved by its use. That variety called *sun-pain* has been immediately cured in every case. I have had no cases of neuralgia which have given me any real trouble since I have used this preparation."

The same writer claims that it is almost specific in *asthma.* But all the Potash salts have some reputation in that disease.

It has been praised in *whooping-cough, epilepsy, chronic bronchitis, nightsweats,* and *hypertrophy of the heart.*

Dr. Ray speaks highly of its virtues in *hypertrophy,* also in *functional disorders of the heart.* From among the many cases which he reports, I select the following characteristic symptoms which he removed by its use: *palpitation, ringing in the ears, vertigo, intermittent pulse, waking with a sense of suffocation and disturbed sleep at night.* (*All were improved in the open air.*)

Some of his cardiac cases were organic, others purely functional in their nature.

I will try and give you an idea of the symptoms and general pathological state for which this medicine is suitable. Taking into consideration the constituents of the drug, it is evident that the first general indication for its use is *a depraved and impoverished condition of the blood.*

Next in importance we must have a *debilitated and irritable state of the nervous system,* and finally, as a result of these two conditions, we shall find a *weak and irritable heart.*

If you will remember the symptoms first mentioned, for which the eclectics have used it so successfully, you will recognize the fact that they all depend upon one or more, or all, of the above three general morbid states.

My own experience with the remedy has been almost altogether in the direction of diseases of the heart.

I have found it particularly useful in that condition known as

chlorosis, where the heart is particularly enfeebled, the blood is in a watery condition, with an excess of white corpuscles, and a dropsical tendency impending. Such patients may be quite *obese-looking*, but it is obesity without plethora—a contrary condition. I imagine the apparent obesity is not from fat alone, but a condition of the cellular tissue simulating it. In these cases the heart beats very feebly and irregularly, fainting spells are frequent and distressing, dyspnœa is excited by the slightest exercise, and the kidneys are very torpid.

In these conditions give the remedy in doses of five to ten grains of the 1^{x} every four hours, until improvement sets in. Larger doses may be used with benefit and safety, namely, as much as from two to five grains three times a day.

In *irritable heart* it is fully equal to Lycopus or Collinsonia. It is especially indicated when the extremities are cold and the patient is sensitive to cold air. All the functions of nervous life are enfeebled, and the symptoms are similar to those quoted from Dr. Towne.

Fatty degeneration of the heart ought to be favorably affected by this medicine, but I would advise it to be given as high as the 3^{x} trituration.

I would not prescribe it in hypertrophy of the heart with enlargement, for I do not consider it homœopathic to that condition.

If, however, with such hypertrophy you find great poverty of the blood and an exceedingly irritable state of the cardiac nerves, it might be used with advantage as a palliative.

In *hypertrophy with dilatation*, it ought to prove an excellent remedy, for it possesses the power of imparting tone to the attenuated and feeble muscular structure and quieting the irritable cardiac ganglia and the accelerator nerves of the heart. In these cases you can use it in appreciable doses (two to four grains every six hours).

It is readily soluble in water, and a drachm can be dissolved in four ounces of Aqua gaultheria, and a teaspoonful or two prescribed as often as required by the exigencies of the case.

FORMICA.

This remedy, which should be called Formic acid, is a secretion

of several species of ants—particularly the Formica rufa. It is an acrid, irritating fluid, exuding from these insects when they are irritated or angry. It was introduced into practice by Dr. Hering, who has a *penchant* for unique and out-of-the-way remedies. He recommends it for the following affections:

Affections of the *spinal cord, spasms.*

Rheumatism, appearing suddenly, mostly in the joints, with restlessness; the patients desire motion, although it makes the pains more acute; pressure relieves the pain; there is sweat without amelioration.

Ophthalmia, rheumatic, and its sequelæ. *Deafness,* and other diseases of the ear. *Lack of milk* in nursing women. *Seminal emissions.*

The predominant time of day is from 2 to 4 P.M.

Consequences of cold and wet, cold baths, or damp weather.

It often helped when Chamomilla only ameliorates, and when Belladonna did not agree.

The analogues of Formica are Apis, Rhus, Urtica, Dulcamara, and Croton.

I have never used it, and think you will find other remedies more useful.

It ought to be useful in nettlerash, for Chloral hydrate, which contains Formic acid, causes and cures urticaria.

The sting of the agricultural ant of Texas causes quite painful symptoms. A nervous, chilling thrill, painful and disagreeable, passes rapidly all over the body from the point where the sting penetrated. A feeling like alarm and horror accompanies this sensation.

FUCUS VESICULOSUS.

We are often urgently solicited by unfortunate patients, the victims of abnormal obesity, for some remedy that will rid them of their superabundance of fat. If we do not prescribe something they lose faith in our medical skill, and seek elsewhere for remedies which may do them irreparable injury.

The *Fucus,* or *Seawrack,* while it is comparatively harmless, seems to be a potent remedy for removing abnormal adiposis. Its

use should, however, be aided by proper diet, such as abstinence from fats, sugar, and alcohol in any form. This drug was first brought to the notice of the profession by a French physician, M. Duchesne, who thus writes of it:

"This seaweed is perennial, with the frond or leaf flat, smooth, and glossy, from one to four feet long, from half an inch to an inch and a half broad, furnished with a midrib throughout its length, dichotomous, entire upon the margin, and of a dark olive-green color. Small spherical vesicles, filled with air, are immersed in the frond near the midrib. The air in these vesicles has not the exact composition of atmospheric, consisting, according to the analysis of M. Ernest Beaudrimont, in one instance, of 28.3 per cent. of oxygen, and 71.6 of nitrogen; in another, 26.5 of the former, and 73.5 of the latter. ('Journ. de Pharm.,' 4e ser., ii, 449.) The fruit consists of roundish, compressed receptacles at the ends of the branches, filled with a clear, tasteless mucus. The plant grows upon the shores of Europe and of this continent, attaching itself to the rock by its expanded woody root. On the coasts of Scotland and France it is much used in the preparation of kelp. It contains much Soda in saline combination, and Iodine, according to Gaultier de Claubry, in the state of Iodide of potassium. These ingredients remain in its ashes, and in the charcoal resulting from its exposure to heat in close vessels."

The charcoal, which is sometimes called *Æthiops vegetabilis*, or *Vegetable ethiops*, has long had the reputation of a deobstruent, and has been given in goitre and scrofulous swellings. Its virtues were formerly ascribed chiefly to Carbonate of soda, in which it abounds, but since the discovery of the medical properties of Iodine this has been considered as its most active ingredient. The mucus contained in the vesicles was applied externally, with advantage, by Dr. Russell as a resolvent in scrofulous tumors. M. Duchesne Duparc having given a trial to this Fucus in inveterate psoriasis, in which it had considerable reputation as a remedy, found it of little value; but he observed an unexpected effect, *that of diminishing fat without in other respects injuring the health*, and was thus induced to try it as a remedy for morbid obesity. His anticipations of its efficacy in this affection were not disappointed. He employs the whole plant, either in substance or in the form of pill, in decoction, or in extract. It is not till two or three weeks after beginning with the remedy that its effects in diminishing the obesity begin to be perceived, and one of the first signs of its favorable action in this respect is the increase of the urine, and the appearance of a black pellicle on its surface. Dr. Godsfrey tried the experiment on himself with satisfactory results, confirming the statements of M. Duchesne.—("Jour. de Pharm.," Juillet, 1862, p. 65.)

As civilization advances, with all its gigantic improvements, mankind deteriorate. Non-vital temperaments predominate. One of the essential elements of deterioration is obesity or corpulence, an ingredient of a lymphatic habit; hereditary tendency, overeating, want of proper exercise, sedentary habits, inattention to the secretions and bathing, overstimulation, drinking, carbonaceous food, laziness, absence of sunlight, are productive of it. The true condition is the excess

of fat; a non-vital element, not a usurpation of the normal structure by adipose tissue, but an excessive secretion of fat. Restricted diet to non-carbonaceous elements; no excess of fluids; exercise; bathing; sunlight; no alcohol, as that retards the elimination of carbon; indeed, all hydrocarbons should be avoided.

A physician, writing of its action, in "New Preparations," says:

About fifteen months ago I commenced experimenting with Fluid extract Fucus vesiculosus. I promised at that time that when I had concluded my experiments with the medicine I would inform you in regard to the results. The first case upon whom I used it is the most important and interesting in its results on account of the condition in which I found the patient at first, and the almost magical manner in which the medicine acted. I will therefore give a tolerably complete history of the case:

Mrs. W., æt. thirty-eight years, married for several years, but never bore any children, always aborting about the second or third month. She was very corpulent, weighing about three hundred pounds. Her menstrual function was very irregular, and she was at times affected with *amenorrhœa*, and at times with *dysmenorrhœa*. When she had the latter, the pain was in the beginning of her *nolimen menstruale* almost unbearable. She was also the subject of severe attacks of palpitation of the heart and great dyspnœa, coming simultaneously, and lasting for from a half to one hour, and these attacks were of almost weekly occurrence. She had been treated by different physicians for these difficulties, but with only temporary relief. It was for these troubles that she called upon me to relieve her. After examining her thoroughly and finding no organic disease, either of the lungs or heart, I arrived at the conclusion that the plethora and excessive obesity produced all of her sufferings; therefore, acting under the influence of this belief, I requested her to allow me to prescribe a course of treatment designed to diminish her corpulence and plethora, to which she reluctantly consented, and I ordered a bottle of Fluid extract of fucus vesiculosis, as I had seen it recommended in your periodical, "New Preparations," and other works on therapeutics.

When the medicine arrived I prescribed it at first in teaspoonful-doses, thrice daily, before meals, gradually increasing to a tablespoonful; and, finally, after taking three bottles, to two tablespoonfuls. At the same time I prescribed a course of dieting, which consisted in excluding from the food as nearly as possible all starchy and saccharine articles, but allowing as much as wanted of all other articles, such as fruits and vegetables, except potatoes and rice; meats of any kind, except pork. Of this liberal diet I allowed her to eat all her appetite craved; and, right here, I wish to say, that the happy result of the treatment was, in a great measure, due to the faithful manner in which she carried out my prescriptions, both in regard to the dietary and medicine, for, from the very first day of the treatment, she never missed a dose of medicine or ate a mouthful of "forbidden fruit."

After she had taken the first bottle her menstrual function was greatly improved, the palpitation had nearly disappeared, and she had diminished in flesh so that the most casual observer could notice it. In all she has taken twelve pound-bot-

tles of the medicine, and to-day she claims to be perfectly healthy in every respect. Her menstrual function is *completely and permanently restored*, coming on at the regular time and continuing the natural time, and passing off without hardly a pain. The palpitation of the heart from which she used to suffer so much has entirely disappeared, never having the least symptom of it since taking the second bottle of medicine; and in *embonpoint* she has diminished *wonderfully*, weighing at present only one hundred and ninety pounds. This does not hardly seem reasonable, yet it is as true as it is that I am writing about it. I am requested to withhold her name, but if any person wishes to correspond with her they can have her address by applying to me and inclosing a three-cent stamp for reply. To use her own words, Mrs. W. says: "I feel better than I have for years in every respect, and I have not had a pain or an uncomfortable feeling hardly worth mentioning since beginning the use of the medicine."

Now some persons may ask the question whether it was the Fucus vesiculosus or the strict attention to dieting that accomplished the result. Indeed, I asked myself this question while treating the case, and not wishing to be misled in regard to the effects of the medicine, I determined to ascertain, if possible, a true solution of the question. I therefore discontinued the medicine for awhile, still allowing her to continue the dietary as usual, when the unfavorable symptoms began to return; but, as soon as the medicine was resorted to again, she commenced to rapidly improve; then I discontinued the dietary, still allowing her to take the medicine as usual, but could notice but little change, except that she did not seem to improve *quite* so rapidly as when using the two in conjunction.

I therefore conclude that the *medicine* is the *facile princeps*, or the chief agent in accomplishing the results above mentioned, although the dietary is a valuable auxiliary in the treatment.

Since using the medicine upon this case, I have used it upon others with equally certain results, but none with such rapid action.

In conclusion I will say that for reducing corpulency there is no better or more certain agent known to the profession. It is perfectly harmless, and on the other hand seems to invigorate the system in general to a healthy action, *regulating* the assimilation of the food, and thus overcoming the excessive accumulation of adipose. It is said also to increase the amount of fat, where the system seems to be abnormally deficient. In fact it seems to act by regulating the function of assimilation to a healthy condition, and thus bringing the system to a *natural and healthy* condition.

Again, when there is a functional derangement of the menstrual function dependent upon some fault of nutrition, or from plethora or excessive obesity, the medicine seems to control the disorder with great facility. In fact, any disorder resulting from faulty nutrition, it seems to me, that if I am right in regard to the action of the medicine, it will be a valuable agent in controlling, *e. g.*, tuberculosis, etc.

Subjoined is the mode in which Fucus vesiculosus is employed by M. Duchesne Duparc, who was the first to extol it as a means of counteracting obesity. He says:

This remedy is best taken in the morning, fasting. Its use requires no change in the ordinary diet; I have always allowed persons to eat according to their desire; and apart from too much farinaceous food, beer, prolonged baths, and a too sedentary life, which is always necessary to avoid, I never impose serious privations.

The action of the Fucus on the system is very easily proved. After using it some time the patient feels lighter and more active, the stomach acts with more rapidity, and the hour of repast is more impatiently looked for. Flatulency diminishes and then disappears with those who have habitually been accustomed to it. The act of digestion is no longer accompanied by flushings of the face, by fulness and weight in the epigastric region, and flashes of heat toward the head.

It is not till after two or three weeks that we begin to observe special and characteristic phenomena; then the urine of those under its influence becomes generally more abundant, and begins to present on its surface a coating, or black film. It is from this period that the resolvent properties are manifested, and the first intimation of becoming thinner are displayed. This result, which some look forward to with much impatience, is every day more decided, and, although variable in degree, has never yet failed.

These different phenomena show us then in the Fucus vesiculosus a real stimulant of the absorbent system, concentrating principally its actions on the fatty globules. The thinness which it determines is not always produced in a uniform manner. I have seen it limited to certain isolated parts, which are then almost always those where the fatty tissue accumulates in the greatest abundance. Thus, with one it is the chest, with another the abdomen, and with the third the nape of the neck and the upper part of the shoulders.

But the destruction of fatty matter is not all that the resolving properties of the Fucus vesiculosus is capable of accomplishing; for many observations seem to prove that the same properties may become useful in certain other diseases, such as cutaneous infiltration, passive dropsy, atonic gout, etc.

There is one point to be mentioned which relates to the choice of the Fucus which is of great importance. We know that the Fucus vesiculosus belongs to a family which contains hundreds of species; that many of these are almost inactive, and the greater number of the others perfectly useless as remedial agents; hence it is absolutely necessary not to lose sight of the botanical characters of the true *Fucus vesiculosus*. The neglect of this has given rise to daily deceptions, and I have seen many persons from this cause lose their time in prolonged and useless experiments. It was thus also that a patient complained of having taken for three months, without any result, large quantities of Fucus which I had prescribed for him, and, which upon being brought to me, I found to be common seaweed. I am not ignorant of the difficulty which is experienced even in Paris in procuring the true Fucus vesiculosus; because I have had repeatedly offered to me, under that name, by justly celebrated houses, *Fucus nodosus*, which is far from possessing the same activity. It may be added that *Fucus nodosus* is frequently sold in this country for Fucus vesiculosus; and that the same care is necessary here for the discrimination between the true Fucus vesiculosus and the various "seaweeds" and "gulfweeds" which are offered for sale.

Dr. Griffiths, in a pamphlet entitled "How to get Lean," writes:

Since practicing medicine in the State of Delaware I have discovered a species of seaweed, or seawrack, as it is commonly called here (Fucus vesiculosus; common names, seawrack, bladder-wrack, etc.), that possesses the peculiar properties of diminishing the excessive accumulation of adipose tissue in the human system without otherwise injuring the general health. An infusion is made from the weed by using one ounce, or a small handful, to a pint and a half of boiling water allowed to draw in a covered vessel. Cool, strain, etc. The dose is a small teacupful three times per day, but no particular nicety need be paid in regard to dose or quality. Drank *ad libitum*, it will reduce a burdensome deformity and at the same time ameliorate the general state, which may have been the primary source of the development of the adipose tissue. My attention was attracted to it by finding a patient who had been drinking of the infusion with the expectation that it would cure an inveterate form of *psoriasis*, a form of skin disease, as it has a popular reputation as a specific for that affection. He informed me that it had done him no good, but found that it diminished his fat quite considerably. I immediately took the hint, and secured a quantity of it myself, and commenced drinking an infusion of it; and, taking little or no other drinks, in the course of a few weeks my burdensome form grew "small by degrees and beautifully less," much to my satisfaction. I had ransacked the whole medical literary curriculum for a remedy that would do this without injuring the stomach and producing a worse disease than the one it was given for, but failed to find it. Knowing with what anxiety the corpulent look upon their deformity, and how anxious they are for relief, I am anxious that the public should know of this harmless remedy. I administered it to three of my corpulent neighbors, with the following results:

In neither of the cases was it administered with any regard to regularity. In one case the loss was from twelve to fifteen pounds in about two months; in another the diminution in weight was thirty pounds in three months; in the third there was decided relief from the discomfort under which the patient labored, but as no attention was paid in regard to weight, etc., the record was not complete.

Great care should be taken in collecting, as there are many varieties of seaweed, and it is easily confounded with other marine plants, which are entirely inert, so far as the peculiar efficacy is concerned in removing obesity.

Within the last few years many individuals, whom nature or their habits have endowed with an uncomfortable burden of polysarcia or pinguitude, have carefully endeavored to follow the rules of diet and habits prescribed by Banting in his work on corpulency, and a great portion of these, after months of sacrifice of the pleasures of gastronomy, have abandoned the task, with the verdict, "Humbug!" But if those afflicted with *embonpoint excessif* will use the infusion of gulf-weed, as suggested, they may arrive at the desired degree of attenuation. I can assure them that it will absorb fat with greater certainty than any other remedy known. It seems to act by the absorption of the adipose tissue, and modifies or lessens the secretions from the oily sudoriferous glands.

"The above article was published in the 'Baltimore American' over a year

ago, and extracts from it were pretty generally published by the papers throughout the country. I received hundreds of letters making inquiry for the seaweed, price, the source from which a supply could be obtained, etc. There was but a small quantity of it in the market at that time. I had a small quantity of the fresh weed gathered at considerable expense. The weed was bulky and inconvenient for shipping, and the domestic form of the infusion was troublesome to prepare, and not an eligible form of administration. I, therefore, had manufactured a compound fluid extract, containing all the properties of the weed in a concentrated form, with the addition of the other drugs known to be efficacious. To many of the applicants I sent the weed, and more preferring the fluid extract prepared by myself, it being a more convenient form of administration. I have received numerous letters confirming all we have claimed for it. Some few have stated that they received no benefit, or could not faithfully follow the directions. In most of the cases I have suggested a system of dieting in accordance with my ideas of the cause of corpulence, presented elsewhere. We have but few, if any, specifics in medicine; it is hardly expected that we should, owing to the diversity of constitutions, diseases, etc. We have no medicine applicable to all cases. That it is a specific, I do not claim. But that it will prove beneficial in a very large number of cases, I have not the least doubt, if the rules of dieting suggested are faithfully followed, and the fluid drank is reduced to the least possible amount consistent with comfort.—'Corpulence, or How to get Lean.' Dr. Griffith in 'New Preparations.'"

Dr. Leonard, commenting on the above, says:

"There is much testimony of Fucus vesiculosus being a positive fat *r*educer; then, too, there is some testimony, decidedly in the minority, however, that goes to show that Fucus is really a fat *pro*ducer. (*Vide* 'New Preparations,' page 23, July, 1877.) Here are two extremes to be harmonized; how is it to be done? It is our opinion (we do not assert it to be a fact, mind) that the proper cases are not selected in these cases of reported failures. From our study of the drug we do not believe Fucus to be a reducer of the adipose tissue of *healthy* subjects. It is mostly on those cold, torpid individuals, with a cold, clammy skin, loose and flabby rolls of fat, pendulous belly, etc., that Fucus will display its powers to the best advantage. In this class of cases everything about them is apathetic; fat, to them, is a morbid condition, a result of vitiated function. In this class of cases the remedy acts beneficially by overcoming this torpid and morbid tendency, thus reducing the size by toning up the vascular and sympathetic system. This, we say, is our belief of what the action of the remedy is. Possibly it also acts upon the starchy matters of the food in some manner so as to prevent their easy change into fat when introduced into the human economy."

Of course, then, if a person is perfectly healthy, the flesh solid and firm, the fat not in rolls or flabby, the *primæ viæ* in good order, the action of Fucus, if it be possessed of this peculiar tonic principle we have attributed to it, would

necessarily go to building up the tissues of the body rather than to the destruction of them. Still, in spite of this, we had a young man, apparently of excellent health, flesh firm and muscles hard, grow thin on the use of the remedy. He was, however, exceedingly large, weighing over three hundred pounds, the bony framework of his body being quite short.

Another gentleman of our acquaintance, a doctor, whose weight is about three hundred pounds, has been taking the remedy—he belongs to our class of healthy, active, large men—with the result of overcoming a chronic constipation, or lethargy of the liver and bowels, but with no effect on the diminution of his weight. He says, however, that he feels lighter in spirits anyway, if not in bodily flesh. He has given the remedy in other cases of chronic constipation or intestinal lethargy, and with the same favorable results. In this respect he thinks the remedy a valuable one.

This, in fine, is the sum of the testimony upon the drug, as reported to us. It is altogether too new yet to allow one to define its action very minutely, or to assign the cases that it will benefit; it is yet in the school of empiricism. Still, in the class of torpid, unhealthy fat-producers, as above described, we believe it will be of benefit.

A. F. Pattee, M.D., in the "Druggists' Circular," says:

The great bank of gulf-weed, which extends, at the westward of the Azores, from the 20th degree to the 36th degree of north latitude, still occupies the same position it did in the time of the earliest navigators, and between this and European shores are various detached tracts in ridges from ten to twenty yards wide and of indefinite length.

In this situation it continues to grow luxuriantly, and appears to multiply itself by offsets, at first accidentally broken off, and immediately establishing themselves as independent plants.

The gulf-weed that is now sold is the Fucus vesiculosus and nodusus. The common names are Twin-bladder, Fucus, Bladder-weed, Bladder-wrack, Rock-weed, Shore-weed, Seaweed.

Habitat.—Along the seashore, on rocks and stones left exposed at low water; also on artificial piers and quays, in estuaries extending up rivers. As long as the water remains sensibly brackish, it can be found, both summer and winter, in great abundance. It requires no particular care in gathering, as all species of the Fucus have similar properties.

I have used it since 1860, and can say that I have seen several cases of morbid obesity cured by drinking freely of a tea made from this plant. I consider a decoction of the weed the most eligible form in which it can be given.

The plant is equally as beneficial for lean people to use to make them fat and plump. It changes the unknown morbid condition that exists in either case to a healthy state. I have used it in the following diseases with apparently good results: Chronic cystitis, irritable bladder, debility, chronic diarrhœa, dyspepsia, enlarged glands, mal-nutrition, etc.

It is also largely used in the manufacture of kelp and iodine. It furnishes a good food for cattle.

GALLIC ACID.

This substance forms six per cent. of the astringent principle of nut-galls.

The first notice of the remedy appeared in the "New Materia Medica," published as an appendix to the North American Journal, by Drs. Marcy and Peters. No proving appeared until 1872, when a brief one was published in the "American Observer," communicated by Dr. Kimball, and it will be found in Vol. I of this work (Symptomatology).

By referring to my lecture on Geranium, you will find my explanation of the homœopathic action of "astringents."

In common with all that class, its primary action is to cause contraction of all the tissues with which it comes in contact. As it is absorbed into the blood, it may reach any tissue of the body if it is taken in large quantities for a sufficient length of time. It is said to be much less powerful than Tannic acid, but we are informed that Tannic is almost wholly *changed to Gallic acid in the body;* it follows that as a remedial agent the Gallic acid answers for both.

Gallic acid is eliminated from the body by the kidneys. We should naturally expect, then, that in diseases of the urinary organs this medicine would prove curative, if anywhere.

The clinical experience which I have been able to collect from both schools, together with my own use of it, confirms this idea.

In *hæmaturia*, especially of the non-inflammatory variety, it has been highly praised by Dr. Garrod, an eminent allopathist, author of a work on "Diseases of the Kidneys," and by our Dr. Marcy.

The hæmorrhages of the kidneys in which it is most useful are those which occur after *scarlatina*, in *Bright's disease*, and after *injuries* to those organs. I have used it myself with decided advantage in many cases in which Millefoil, Turpentine, Hamamelis, and similar remedies failed. Dr. Garrod gave three grains three or four times a day; but I have had good effects from grain doses of the first decimal trituration.

In *albuminuria*, after the inflammatory stage has passed, it has been known to change the urine to a healthy standard.

You must bear in mind that it is *secondarily* homœopathic to these affections. If I should prescribe it in active hæmorrhage from active congestion, or albuminuria from the same cause, I would prescribe it in the 6th or 12th, and probably in alternation with Cantharis 6th or 12th.

A number of excellent cures of nephritic maladies are reported by the late Dr. Redman Coxe, of Philadelphia. He employed it in the 1ˣ trit.

Dr. Marcy says: "In many cases of *chronic nephritis*, one-grain doses of the first trituration, repeated every three or four hours, has effected prompt cures. It removes pain from subacute nephritis more speedily than any remedy we have ever employed."

In certain cases of *pyrosis*, when every other remedy has been tried ineffectually, it has been known to *cure*. "It not only checks the secretion with certainty and rapidity, but it gives general tone to the stomach, increases the appetite, and even removes *constipation* in many cases." Its power to cure constipation is due to its *primary* action. The small quantity not eliminated by the kidneys acts dynamically upon the intestines, and performs a veritable primary homœopathic cure. Even Tannic acid will cure constipation, according to Dr. J. G. Wilkinson, of London.

Gallic acid has been recommended for hæmorrhages of other organs, but I doubt its efficacy. We have so many specific hæmorrhagic remedies that we need not resort to this.

Dr. Marcy quotes many authorities in favor of its power in checking colliquative perspirations. He gives his own experience with it in cases of advanced phthisis with copious expectoration of purulent matter, profuse nightsweats, diarrhœa, and other hectic symptoms, and alleges that in some cases remarkable palliative effects resulted from its use in the first trituration. It seems to check the disease for a time, and even prolong life and give comfort, when there is no hope of a cure.

I once had a case of disease of the prostate, probably ulceration, in which profuse hæmorrhages appeared very often. The only remedy which appeared to have the power of checking it was Gallic acid in the 1ˣ trituration.

GALIUM APARINE.

The members of the genus *Galium* are called "*clivers*" in this country, and "*goose-grass*" in Europe. This species is found in the woods, a trailing, rough plant, with white lateral flowers, rough seeds, leaves eight in a whorl.

There are a dozen or more species in the genus, some with leaves six in a whorl, others have only four. Some have flowers yellow, others a dull purple. Not all have identical medicinal properties, for some contain glycyrrhiza sugar, and others a coloring agent like *madder*. They belong to the *Madder* family.

Clivers has been very extensively used in domestic and "botanic" practice, and it appears to possess some remedial virtues which render it worthy a place in our Materia Medica. We have no provings of it, but the clinical experience obtained is worth something.

The eclectics have a good deal of confidence in Galium in *calculi* of the *bladder* or *kidneys*. They allege that it possesses "a solvent power over the stone, causing it to crumble into a sandy mass, so that it can be discharged."

They assert that if used in large quantities it causes constant chilliness, "owing to its cooling properties," and that it is, therefore, "contraindicated in passive and atonic states of the bladder and kidneys."

It is said that an analysis of the plant shows it to contain Citric and Tannic acids.

In the second edition of my "New Remedies" I made the following observations on the use of Galium. They are so appropriate that I quote them now instead of attempting to offer any new remarks:

While engaged in an extensive country practice, I often observed that the cold infusion was drank freely by fever patients, especially if scalding or burning during micturition was complained of. At first I disliked to have them use it in connection with homœopathic remedies, but I found its use so general, and the idea of its mild curative powers so engrafted into the minds of the people,

that it was a difficult matter to proscribe it. I have never noticed that its use interfered in any way with the action of homœopathic medicines. In order to test in a practical manner its alleged usefulness in urinary affections, I have often selected cases of simple dysuria, strangury, suppression, etc., depending on uterine irritation, or a cold, and prescribed the cold infusion in alternation with blank powders or pellets. In this way I have gained some correct ideas of its sphere of action. It seemed to me particularly useful in the dysuria and suppression of urine in young children from colds, or when attended with aphthæ, or what might be called a *scorbutic* state of the system; also, in the strangury of women from uterine diseases, hæmorrhoids, or irritable bladder. It seemed to be useful in the strangury and scanty urine in rheumatic fever and in the irritable bladder (from prostatic disease) of old men. The late Dr. Kendall, a homœopathic physician, reports to me two cases which show clearly its curative action:

(1.) A young child had been troubled with painful dysuria for several days. Every attempt at urination was accompanied with cries and screams. A weak infusion of Galium 3d was given, and in less than one hour the child urinated profusely, without pain.

(2.) An old man had been troubled for months with intensely painful dysuria, frequent ineffectual urging, scanty discharge, etc. He was directed to drink a pint a day of a cold infusion. In a few days he reported himself cured.

Several similar cases have been reported to me by physicians and lay members of the school. I think the G. asprellum is the tincture generally used, as the G. aparine does not grow so abundantly in the West.

Officinal Preparation.—In general practice, the cold or *warm* infusion is usually used. All writers agree that this is the most eligible method, because *heat* destroys or dissipates the medicinal virtues of the plant. The herb (the root is not used) should be placed in cold or tepid water and allowed to stand for two hours. Three or four ounces to one quart of water is the usual proportions. It is sometimes sweetened. The expressed juice has been used, according to Wood, three ounces twice a day. King advises the inspis-

sated juice, one or two drachms, three times a day. I do not know if alcohol injures its medicinal qualities, but it is probable, as alcohol acts on some vegetable juices much in the same manner as heat; if not, an equal or one-fourth part of alcohol might be added to the expressed juice to form a mother tincture. I would, however, advise the following method of preparing this remedy for homœopathic use in cases where the *infusion* was not acceptable, or when the physician could not rid himself of antiquated prejudices sufficiently to use it. *Mix together equal quantities, by weight, of the cold expressed juice and sugar of milk; triturate until the mass is perfectly dry.* It may then be put up in close bottles.

DOSE.—I am aware that I am treading upon disputed ground when I advise the use of *infusions* of vegetable remedies. But if it is better for our patients to use such a preparation, we should not hesitate. Moreover, do we not advise cold infusions of Ulmus fulva, Flaxseed, Althæa, all of which are mild medicinal substances. Hahnemann, in the early part of his homœopathic practice, used infusions, and he distinctly advises the use of infusions of plants of small medicinal power, when we desire to prove such plants. (See "Lesser Writings.") I am aware that some physicians would prefer to prove even this medicine in the attenuations. In this way "itching of the elbows and nose," "drawing in the fingers," "slight vertigo after smoking the sixth pipe," or even "unpleasant dreams while lying on the back," might be noticed, but nothing which could show us the real sphere of action of the remedy. I do not deny that certain potent or inert drugs may be proven in attenuated quantities, but remedies similar to the Galium cannot. He who would prove this plant, should, without altering his mode of life, drink a wineglass of the ordinary infusion, four or six times daily, for a week or more.

In disease, I would advise the *cold infusion* in the complaints enumerated above, in which it has been found useful. It may be taken in tablespoonful doses, every one, two, or three hours; or the *powders*, prepared as above, may be prescribed in doses of five or ten grains at short intervals.

It seems to be *primarily* homœopathic to passive, torpid conditions of the urinary apparatus. In such cases the 3d trituration may be found curative.

The infusion should be made from the *fresh* plant, when obtainable, as the dried possesses less power. Children may be made to take it readily by adding sugar and cream, or milk, to the infusion.

The following clinical record of the use of Galium in cancer, etc., is taken from the "British Journal of Homœopathy," vol. xxiii, page 189 (1865):

Hard Nodulated Tumor of the Tongue, apparently of a cancerous nature, which disappeared under the use of Galium aparinum. By F. A. Bailey, F.R.C.S.—Jane C——, a married woman, æt. sixty, residing at Ramsbury, in Wiltshire, was admitted into the hospital, April 5th, 1864, on account of a hard, firm, somewhat circumscribed tumor, of about the size of a boy's marble flattened, imbedded in the substance of the tongue, on the right side, about an inch from its apex, which had been gradually increasing in size since she first observed it, five weeks before, when it was about as large as a hemp-seed.

The upper surface was nodulated and uneven, and the swelling generally had the appearance and feel of a scirrhous formation of the organ. It had all along been extremely painful, so much so as entirely to prevent her sleeping at night; it was exquisitely tender to the touch when handled, and latterly she had experienced a throbbing-beating pain in it, which had induced her to think it was about to burst. There was no appearance of its having been caused by injury to the tongue through a decayed tooth. She had always been in the habit of living tolerably well, but had been suffering a good deal from general debility and languor for some time before the commencement of the swelling. Her countenance did not indicate any peculiar cachectic condition of the system, and there was no history of any hereditary cancerous taint in her family. The tumor had increased rather rapidly lately, and she was quite unable to masticate solid food, on account of the pain it induced, which had added much to her original weakness.

She was ordered to have strong cold beef tea frequently during the day for diet, with a pint of porter daily, and to take the following medicine: R. Extract galii aparini solidi, two ounces; Aquæ ad, half pound. M. ft. extract. fluid. Of this extract a drachm and a half was given twice a day, in a wineglassful of water. She was also ordered to use the above mixture as a warm lotion to the mouth, several times during the day, keeping it in the mouth for some time during each application.

A month after her admission she had completely recovered from the languor and debility under which she had previously been suffering; her face, instead of being pallid and sallow, had recovered a healthy and somewhat florid appearance, which was natural to her; the pain in the tumor had been gradually diminishing, and the tumor itself had become so much reduced in size as to be scarcely discernible to the touch, and as she was now able to take solid food without discomfort and with an appetite, she was at the end of five weeks discharged from the hospital. A fortnight afterwards, having continued the remedies prescribed, she presented herself as an out-patient, when it was found that the tumor had

entirely disappeared, and the tongue had recovered its natural structure and appearance.

GENTIANA QUINQUEFLORA.

The "five-flowered Gentian" has long had a high reputation among the country people, to whom it is best known by the name of "gall of the earth." When residing in Central Ohio, where it is found abundantly, I have known the victims of chronic ague use it with marked success. It seems to differ from the other *Gentianæ* in possessing decided antiperiodic power.

Dr. C. A. Yelvington, a distinguished physician of Susquehanna, Pa., recently called attention to it as a superior antiperiodic, and says that he first learned its use from the tribe of Indians that once lived on the Susquehanna River. He says that "he has succeeded in obstinate intermittents where Quinine and other antiperiodics had failed. He used the decoction of the herb. A fluid extract or the saturated tincture is a better form for administration in fever. It is a valuable tonic for old cases of dyspepsia and torpid liver."

King ("Dispensatory") says:

The people use it as a bitters and a liver medicine. It is a very positive tonic, and possesses active antiperiodic powers. The saturated tincture, combined with Ptelea, is a very remarkable tonic, increasing the flow of gastric fluid, hence a valuable remedy in dyspepsia, either primary or secondary. As an antiperiodic it is well adapted to chronic cases of ague where there is debility and a tendency to relapse. It grows in woods and pastures, and flowers in September and October, just before frost. It is found in many parts of the United States.

Dr. Yelvington gives his experience, which is confirmed by that of many recent writers:

My first trials were made within a few days on three cases of obstinate intermittents of the tertian form, the patients being a mother and two children, having contracted it at their former home, a malarious district in Eastern New York. On inquiring I found it was three years that they had had chills and fever, and this was the third year they had suffered with it. Quinia and other antiperiodics had failed to control the disease, but to my surprise and satisfaction in one week's time it was brought entirely under subjection by the use of a decoction of the herb, and without a recurrence, as had previously been the case in the use of Quinia.

The success in these cases led me to a continued use of the remedy, and with me it soon took the place of Quinia; and in a large and varied practice of over ten years since my commencing its use, I can safely say as a substitute for the former article it has completely answered the purpose. It is a more pleasant bitter, and does not produce any of the unpleasant symptoms attending an overdose of Quinia.

As he seems to have used it *alone*, uncombined with other drugs, his statements are worthy of record. He says:

It flowers in September and October, and is so humble an herb that it would scarcely be recognized even when searching for it, unless in bloom. The early frost kills it, and when an early fall comes it is scarce for a year or two. For the past two years I have used the remedy in a saturated tr., one part alcohol, three parts water, obtaining its strength by maceration, using a press to procure all of the strength possible. I always carry it in my case, and treat successfully many cases with this simple remedy, adding ʒj to from ʒj to ʒij of water, and ordering a teaspoonful of the mixture every hour to four hours, as deemed necessary. For the past two years I have prescribed it satisfactorily in small doses in numerous cases of infantile fevers, also in cholera infantum. From many and repeated trials I would give a summary like the following:

1st. As an antiperiodic it is equal to any, surpassed by none.

2d. An overdose produces no unpleasant symptoms, no ringing of the ears, as in Quinia and its preparations, merely causing a sense of exhilaration and lightness of the body.

3d. It is applicable and may be used at any stage of the fever, and seems capable in itself of reducing the bodily temperature.

4th. As a tonic in enfeebled and chronic diseases it is a remedy *par excellence*, appearing to exert an action over the organs of nutrition and assimilation, as well as being a stimulant to the excretory organs.

5th. Its compatibility combined or alternated with other remedial agents, makes it to the physician the more valuable from its wide range of action.

6th. The safety as a remedy is such that none may fear to use it, as in over ten years' use, I have yet to find the first patient who was obliged to discontinue its use on account of untoward symptoms produced by it, or *even from idiosyncrasy of constitution.*

I think it would well repay a proving; but the fact that it has not a pathogenesis should not prevent us from testing its virtues in chronic malarial diseases, dyspepsia, and hepatic troubles, which so often resist our best-selected remedies.

GELSEMINUM.

The Yellow Jessamine is one of the most important and interesting of all the new remedies. Although it has been studied

with much interest by investigators of all schools, much remains to be discovered concerning its pathological and pathogenetic effects.

It possesses a peculiar interest to me, and I hope the class will be kind enough to listen to its medical history in the homœopathic school.

After the appearance of the provings of Podophyllum, Sanguinaria, and Phytolacca, nearly twenty years ago, no new investigations of any importance appeared relating to our indigenous remedies. In 1860 I became interested in the brief notices of Gelseminum which I found in eclectic medical journals, especially the cases of poisoning, which were of unusual and unique character.

I therefore began, with Dr. J. S. Douglas, of Milwaukee, a series of experiments, physiological, pathogenetic, and clinical. The more I investigated its properties the more I became convinced that it would prove a valuable addition to our Materia Medica.

In 1862 I had collected enough data to enable me to write a monograph of fifty-six pages, octavo, which Dr. Lodge, of Detroit, was kind enough to publish.

Such was the interest excited by this *brochure* that the whole edition was disposed of in a very short time, and the remedy rose in the estimation of physicians, till it took a front rank along with Aconite and Belladonna in the *armamentarium* of homœopathic practitioners.

The reception of Gelseminum was so favorable that it emboldened me to study and investigate other indigenous plants, and embody the results of such studies in a volume entitled "New Remedies," published by Dr. Lodge.

While I am proud of the title which some of my colleagues have given me of "Father of the New Remedies," I must accord to Dr. Lodge the title of "Godfather," for he it was who took the risk of publishing the work and placing it in the hands of our school.

Ten years have now elapsed since the publication of the original monograph, and the literature of Gelseminum and of nearly all the new remedies has grown largely, and will still grow, I hope, during the next and succeeding decades.

The cases of poisoning on record, and those which I have observed in men and animals, show the following effects:

(1.) General prostration and paralysis of all the voluntary muscles, while the mind is clear and the involuntary motions are intact. In this stage, dimness of sight, slight or complete, is nearly always present, together with dropping of the eyelids, with much difficulty of opening them. A slight degree of stupor or sleepiness is usually present, or a sluggish condition of the mental faculties, which are, however, easily aroused.

(2.) Partial paralysis (complete if death occurred) of all the involuntary muscles. First the sphincter muscles, then the respiratory, and finally the heart. In this stage the functions of the brain are not always abolished, but can be aroused by electricity and physical agitation of the body. In other cases a profound stupor occurs, which lasts until death or convalescence.

(3.) In some exceptional cases, when a very large dose is taken, the brain seems suddenly congested, and a kind of apoplexy occurs.

In cases where death seemed imminent, or was to all appearances present, recovery has been brought about by the free use of stimulants and galvanism.

The nearest analogues of Gelseminum are Calabar bean and Conium; next in order come Aconite and Veratrum viride; and, finally, Chloral hydrate may have a close resemblance. It has been thought by some to stand midway between Aconite and Belladonna and the other narcotics; but the fact is that its primary action and secondary effects follow each other in the same order as those first named, while they appear in reverse order when compared with those of Belladonna and its congeners. In other words, the primary effects of Gelseminum are similar to the secondary effects of Belladonna.

The sphere of action of Gelseminum is doubtless principally confined to the *motor side* of the spinal cord, the brain, and the mucous membranes. The sensory nerves are certainly not as profoundly affected by Gelseminum as by Aconite, for I have never seen it produce the benumbing sensations or the anæsthesia of the latter, nor does it cause primarily the hyperæsthesia of Nux,

although it may secondarily. I am of the opinion that it primarily causes *passive* congestion of the brain and spinal cord, just as Nux causes *active* congestion of those organs.

Gelseminum, like Calabar and Conium, benumbs and paralyzes the nerves of motion, both voluntary and involuntary (primary), while Nux and Belladonna irritate and excite both sets of nerves. While Gelseminum produces death by a condition of general paralysis or passive apoplexy (primary), Nux causes death by inducing just the opposite, namely, a tetanic state or active congestion of the cerebro-spinal centres (primary).

Nux and Belladonna cause, by their secondary action, a kind of secondary general paralysis similar to the primary effects of Gelseminum and Calabar.

I make these comparisons in order that you may study the symptoms of both understandingly.

It is almost impossible to separate the primary from the secondary *symptoms*, as the provings stand; but it will greatly aid you to do so, if you understand the nature of the primary and secondary states caused by this drug.

I cannot undertake to give you information as to all the morbid conditions to which Gelseminum is homœopathic, nor can I give you the symptomatic indications for the remedy in all cases. You must, by careful study and comparison, become familiar with its provings and pathogenesis, which you will find in my special "Symptomatology of New Remedies," and in all your textbooks on materia medica.

Bearing in mind my doctrine of dose, as relating to the primary and secondary action of drugs, you will readily understand that in diseased conditions which resemble the primary effects of Gelseminum, you should prescribe only the middle and high attenuations.

Among the disorders in which this medicine is *primarily* indicated are:

(1.) *Paralysis, general and special,* of the voluntary and involuntary nerves (of the striped and unstriped muscles). (2.) *Passive congestions* of the brain, spinal cord, lungs, liver, and other organs. It is secondarily indicated in

(1.) *Convulsions*, first of the voluntary, then of the involuntary muscles, namely: *Hysteria, chorea, tetanus, puerperal spasms;* spasms of hollow organs—of sphincter muscles. (2.) *Active congestions* of the brain and spinal cord and other organs. (3.) *Fevers and local inflammations, hyperœsthesia, neuralgia*, etc.

The Gelseminum is an important *fever remedy*, forming one of the group, Aconite, Baptisia, Veratrum viride, and Gelseminum. It is useful in *all* fevers where the symptoms indicating the drug are present, but it will be found most useful in the following orders:

(1.) *Catarrhal fevers*, from the influence of a cold, damp atmosphere, or a sudden change from hot and dry to damp air. When *influenza* is epidemic, at any season of the year, you will always find cases where this remedy is called for by the following symptoms: Chilliness up the back, cannot move away from the fire without chilliness; the head is hot before the fever sets in, which is *not* attended by *thirst, restlessness*, and *anxiety*, as with Aconite, but a *torpid, heavy* condition. The head feels heavy and big, the face scarlet, the eyes suffused, the nose runs a watery mucus, but little sore throat, the pulse *large, full*, and *quick*, but *not very hard*, and the febrile motions are *remittent*, aggravated about the same hour every day.

[Right here I will give you the characteristic pulse of each fever remedy: *Aconite:* Pulse *small, hard, wiry, quick. Veratrum viride:* Pulse *hard, full, bounding, incompressible. Baptisia:* Pulse quick, full, irregular, compressible. *Gelseminum:* As above given.]

(2.) *Bilious remittent fevers*, when caused by atmospheric changes in the spring, or due to miasmatic influences in the autumn. The febrile symptoms are as I have given them above, and, in addition, such symptoms as intense frontal or occipital headache, puffed face, slimy and bitter taste in the mouth; the tongue may be coated white or yellow, and the breath is foul. In the fall these fevers often take the place of agues, and may change into that form; but the Gelseminum is equally useful in

(3.) *Intermittent fevers*, miasmatic or not. It is best indicated in the *quotidian* type. I do not deny its power of curing tertians or quartans, as it seems to have done, judging from the reports of

various physicians; but in an extensive practice of many years I have rarely found it useful in any but quotidians. It possesses the curious power of changing a quotidian, or bilious remittent, into a tertian fever. The special indications are *chills along the back; fever with hot head, flushed face, cold feet, sleepiness, followed by hot perspiration*, rarely thirst and vomiting. In most cases it should be given *low*, even a few drops of the tincture every two hours in bad cases, continued through the apyrexia and paroxysm. It prevents the convulsions in children with agues better than any other ague remedy. It is useful in so-called "dumb ague," made so by Quinine. In such cases it follows *Ipecac.* with excellent effect. It is also indispensable in "masked ague," assuming strange forms, such as chorea, neuralgia, etc.

(4.) *Infantile remittents*, when due to irritation of teething, or intestinal troubles, or worms, or when caused by malarial influences. In such cases it acts better than any other fever remedy, but should be alternated with some remedy more homœopathic to the special irritation.

(5.) *Irritative fevers*, or that type which is caused by some local irritation, such as ulceration, suppuration, the presence of a foreign body, etc. I know of no remedy which so readily controls this fever, while some specific remedy, or surgical treatment, removes the *cause*. In *hectic fever*, which is a variety of the above, even when shaking chills, followed by great heat and drenching sweats, occur, as in phthisis or pyæmia, the *Gelseminum* will arrest the paroxysms for a long time.

It may be useful in some cases of *enteric* or *typhoid fever*, but unless such fever commenced as a *catarrhal* I should not rely upon it. Even then it would be useful only in the first stage.

In *cerebro-spinal fevers* it is especially useful, and ought never to be forgotten. If you refer to the head-symptoms and the cerebral conditions you will see the reason why. It causes both passive and active congestion, and inflammation of the meninges of the brain and cord, but of a less intense degree of severity than Veratrum viride or Belladonna. It occupies a position between the two. If any of the above fevers are attended by cerebro-spinal irritation, it renders Gelseminum all the better indicated.

In all the *eruptive fevers* (the acute febrile exanthemata) it may be indicated, but especially in *measles*, as it causes both the catarrhal symptoms and the papulous eruption.

In all it assists in determining the eruption to the surface and wards off the convulsions which tend to appear with the eruption. The mental indications are different from those of Aconite or Verat. vir.; it has no anxiety with fear of death, but a torpor, a sleepiness and dread of movement, which is an unfailing indication.

In the South it has been found valuable in *yellow fever*, but I have had no experience with it in that terrible malady. From the records of the symptoms of that fever, I judge that it may be indicated in some cases.

You will find the Gelseminum an indispensable remedy in many diseases of the brain and head, which I will briefly enumerate:

In *active congestion of the brain*, when occurring during fevers, from unusual exertion, or from exposure to the sun. (Use the lowest dilutions.) In *meningitis*, especially in children; in passive congestions. (Use here the middle dilutions.) In threatened or actual apoplexy, with stupor, coma, and nearly *general* paralysis. (It is rarely useful in hemiplegia or paraplegia.) In all these cerebral affections, stupor, torpor of the mental faculties, and wild, incoherent delirium is the rule; while active excitement and violent delirium is the exception.

The *headaches* of Gelseminum are both intra- and extra-cranial. It corresponds to the *congestive* variety, the *cerebro-spinal*, and the *febrile*. It is also curative in the *neuralgic*, especially when due to malarial or catarrhal influences.

The typical Gelseminum headache may come on suddenly, with dimness of sight or double vision; with vertigo, great *heaviness* of the head, it feels too big, and often too "light;" with a semi-stupor, bright red face; dull, heavy expression of countenance; full pulse, and general *malaise;* or,

The headache may be of a settled, dull, heavy character, mainly in the *occiput, mastoid,* or *upper cervical* region, extending to the *shoulders;* relieved when sitting by reclining the head high on a pillow.

In *neuralgic headaches* the pain is either in the upper cervical and occipital region, extending upward and forward, or it occu-

pies the forehead, over one or both eyes. The pains are cramplike, drawing, tearing; aggravated by any exertion or study.

Gelseminum is the best indicated in these headaches when they are *remittent* or *intermittent*. A characteristic symptom is "sensation as if a band was drawn tightly around the head above the the ears, with soreness in the scalp and brain." The head may even be *retracted backwards*, and is relieved by bending the head forward. (*Contra* in Calabar.)

Headaches of this character have been cured promptly, in the practice of many physicians, by the tincture and low dilutions. A few cases have been as promptly cured by the 200th potency.

In diseases of the eyes, Gelseminum ought to prove curative in many cases. I have myself used it with benefit in *amaurosis*, and it has cured many cases in the hands of other physicians. The disorder was generally attended by dilated pupils, a disturbance of the power of accommodation, a misty appearance before the eyes, and heaviness of the lids. This last symptom is a peculiar characteristic of the drug. A person under its pathogenetic influence finds the eyelids so heavy he can scarcely lift them. It may even cause complete paralysis of the lids—an indication of grave cerebral disease.

It causes dimness of sight invariably, and if enough is taken complete blindness results. The exact pathological condition upon which this blindness depends has not been fully determined.

When proving Gelseminum fifteen years ago, it caused an *asthenopia*, from which I have never fully recovered. It ought to be homœopathic to that disorder, and ought to cure it when given in the very highest potencies.

It has caused *hemiopia* and *diplopia*. One of the most recent provings has this symptom: "Everything seems like rolling water before the eyes."

Dr. Woodyatt, of Chicago, and many oculists of our school in other cities, value it highly in some nervous and paralytic affections of the eyes.

In acute ophthalmia it does not appear to be generally useful, but in that curious form which occurs periodically, namely, an intense periodical congestion, from suppressed or masked ague, it cures promptly.

The ear-symptoms are not notable. It causes rushing and roaring, and sudden deafness, which may be due to catarrhal trouble, or paralysis of the auditory nerves, both of which it will cure. It is an excellent remedy for *otalgia*, when applied topically, a few drops on cotton introduced into the ear.

The *catarrhal condition* to which Gelseminum is homœopathic affects all the mucous surfaces, especially those of the eyes, nose, and ears; and in the severest colds, when they affect all those organs, and the whole head suffers, there is no better remedy.

It is rarely useful in chronic catarrh, while it is our best remedy for the effects of *suppressed* or *undeveloped catarrh*.

In affections of the mouth, tongue, and throat it presents a marked contrast to Aconite. The Gelseminum affects the nerves of motion more than the nerves of sensation, while Aconite acts in the opposite manner.

The primary effect of Gelseminum is to paralyze the muscles of the tongue, glottis, and the whole apparatus concerned in deglutition and vocal efforts; but this paralysis is not attended by the numbness and tingling caused by Aconite. The secondary effects of the drug result in spasmodic and tetanic conditions of the same muscular structures.

You will be able to cure, as I have cured, some sudden and alarming *paralytic affections of the throat* with the high dilutions; while in *spasm of the glottis, spasmodic croup*, and *laryngismus stridulus* you will be successful with more material doses.

We can trace this same paralytic and spasmodic influence of the Gelseminum all through the body. In the stomach it causes a peculiar feeling of weakness and emptiness, which may be attended by that peculiar *vomiting* which is due to *paralysis of the œsophagus*. The sense of weight in the stomach, with dull pain, is indicative of the *cramp* which will result from its secondary action.

The abdominal symptoms of Gelseminum are due to two conditions: (*a*) a primary paralysis, and secondary spasm of the motor nerves; (*b*) a catarrhal affection of the intestinal mucous membranes with sympathetic muscular irritation.

You will find it useful, then, in some singular paralytic conditions, especially of the sphincter. Many provers observed that it

caused an *involuntary diarrhœa*, or, rather, a tendency to involuntary evacuations from the bowels, excited by emotions of a depressing character,—as bad news of battles, disappointment, etc. Many cases are recorded where it cured similar conditions. During the war it was very effectual in the diarrhœa of soldiers, especially when aggravated by the excitements of the struggle. In these cases probably the catarrhal and nervous elements of the disorder were both present. A case has recently been reported of a "chronic diarrhœa, aggravated by exciting emotions," cured by one dose of Gelseminum 2000th!

It is indicated in *acute catarrhal enteritis*, which may take the form of *mucous diarrhœa* or *mucous dysentery*, according to the grade of the inflammation. In the first stage of this affection the discharges may be almost involuntary; in the advanced stage they may be attended by intense *spasmodic colic* and *tenesmus*, both of which conditions equally indicate Gelseminum.

The evacuations may be *bilious* as well as mucous. This is due to a catarrhal irritation of the liver, but not to any specific influence exerted by Gelseminum on that gland.

It has been suggested by some as a possible palliative in intense pain caused by spasm of the gall-duct during passage of biliary calculi. It is worth a trial, if Chloral is not at hand.

The same paralytic and spasmodic conditions we have mentioned are found in its action on the genito-urinary apparatus. It has cured *enuresis from paralysis of the sphincter; "wetting the bed" in children; paralysis of the bladder in old people; and involuntary micturition from exciting emotions.* It has also cured opposite conditions, namely: *dysuria*, with frequent urging, scanty urine, and vesical tenesmus; *spasmodic retention of urine.* It has no specific influence on the kidneys, but its primary effect is to cause the so-called "nervous urine," a profuse limpid flow from nervous excitement.

The primary effect of large doses of Gelseminum on the uterus, is to cause a *paralysis of its motor power.* This condition leads to those morbid states for which the remedy has been used so successfully in the high potencies, namely: *atony* resulting in want of contractility, *false labor-pains, passive hæmorrhage* from loss of contractility. Secondarily, it causes *congestion of the uterus,*

spasmodic pains, neuralgic pains associated with cramps in the uterus and legs. It will therefore cure those conditions when given in the lowest dilutions. I know of no remedy more efficient in most cases of *dysmenorrhœa* of the above character, *violent after-pains, cramps in the uterine ligaments.* (The pains of Gelseminum commence in front, and extend upward and backward to the sides and back, or down the limbs.)

Gelseminum has been found useful in irregular uterine contractions. Dr. Fountleroy says:

The following interesting and unique case is briefly submitted in further illustration of the therapeutic uses of Gelseminum. The writer was called in consultation by Dr. William H. Byerly. The following history was elicited: In the *three* previous confinements, from the irregular contractions, partially affecting the muscular fibres, without uniform hardening of the uterine globe,—from the exhaustive continuance for two or three days of the inefficient contractions, marked by frequent pulse, coated tongue and mental wanderings—the doctor had been forced to relieve his patient by a resort to instruments. When called upon the labor had commenced; the os uteri was partially dilated, *and not at all rigid,* but the contractions evidently involved different planes of the uterine muscular tissue, first in one part, then in another. From his former experience the doctor anticipated trouble and delay. The writer suggested the use of Gelseminum, believing that the irregular uterine contractions were due to the want of tone in the sympathetic nervous system. Whether true or not, the result seemingly sustained the theory. Eight drops of the fluid extract were administered at an interval of two hours. After the second dose the uterine contractions became more general, and improvement gradually followed until after the eighth dose, when the patient was delivered, by the unaided forces of nature, of a large healthy child.

It has been used successfully by obstetricians in *deficient labor-pains,* or when the pains are severe but make no progress owing to a *rigid os uteri.* In the former case the medium attenuations are useful, but in the latter quite large doses are often required (ten drops every half hour till relaxation). When your patient is threatened with *convulsions* during confinement, and the pulse is large and *soft,* the face puffed and the expression heavy, do not hesitate to give ten or fifteen drops every fifteen minutes, while you are hastening the labor by the forceps or other means.

Its action on the male genital organs is analogous. It causes *impotence* from lack of muscular power in the penis, while it does not abolish sexual desire. It is thus homœopathic to that form of *emissions* which occur at night from dreams, or by day from sexual

excitement, *without erections*. In such cases it will cure in the 30th and upward.

I do not think it will be found as useful in active nocturnal emissions, unless they occur from local irritation of the seminal vesicles, or during gonorrhœa with chordee. If useful here, the tincture is required.

I know of no remedy so generally useful in acute *gonorrhœa*, with great inflammation, scanty discharge, fever, etc. It controls the active symptoms, and often no other remedy has to be used; it seemingly cuts short the disease. My usual efficient dose is two to four drops every two hours. When the discharge becomes thick, yellow, or creamy, Cannabis, Copaiva, Cubebs, or Oil of sandalwood are needed.

I should expect good effects from Gelseminum in *spasmodic stricture* of the urethra, for I have used it with benefit in an analogous affection,—*vaginismus*, of a purely nervous character, with uterine irritation.

In these cases its internal use may be aided by an injection of the same.

I do not think Gelseminum is adapted to acute inflammations of the parenchyma of any of the organs of the body. Clinical experience has not found it of any value in pneumonia, pleuritis, carditis, or pericarditis, during the inflammatory stage. If useful at all, it is in the congestive stage. Its homœopathicity to acute catarrhal affections makes it an excellent remedy in some disorders of the mucous membrane of the respiratory organs, when caused by cold and dampness.

It is all the better indicated in these catarrhal difficulties if motor disturbances occur, such as *spasm of the larynx, pharynx, and glottis*, or *so-called spasmodic asthma*.

The heart-symptoms of Gelseminum all point unmistakably toward cardiac paresis. The primary pulse of Gelseminum is soft, weak, or imperceptible, except during motion. The heart's action becomes slow and very feeble, and the extremities become cold (but it does not cause the collapse of Aconite and Veratrum). One peculiar symptom of the heart is, "*a feeling as if the heart would stop beating if she did not move about.*" This was observed in a case of dangerous poisoning. It reminds one of the poisonous

effects of Conium, where life is prolonged by movement; the symptom is just the opposite of Digitalis and China. I think it *paralyzes the cardiac ganglia.* In such cases movement of the body keeps the heart going by stimulating those motor nerves which are supplied to the heart from the spinal cord.

Dr. P. P. Wells, when proving Gelseminum, experienced a symptom which goes to prove this theory, "*A sensible motion of the heart* as though it had attempted to beat, which it failed fully to accomplish, and the pulse then each time intermitted, worse when lying down in bed, especially when lying on left side."

It is in *cardiac neuroses* that this remedy is best indicated. They may be primary, with deficient power and action, or secondary, with excessive action. In hysterical palpitation I have found it quite efficient.

Gelseminum is not useful in inflammatory rheumatism, only in that condition of *catarrhal rheumatic* pains before the *catarrhal discharge appears*, or when rheumatic pains appear after suppression of catarrh. In this respect it resembles Pulsatilla, Clematis, and Ranunculus, and should be studied and compared with them.

Future provings and experiments will doubtless increase the scope of the action of this drug, and give us new symptoms and special indications.

I predict that it may be found useful in some affections of the brain and spinal cord, in which it has not yet been used. It may be curative in *locomotor ataxia, softening*, and other serious lesions.

GERANIUM MACULATUM.

This indigenous species known under the common name of "Cranesbill," from the peculiar shape of the seed-vessel, is used by the country people as an almost universal remedy for diarrhœa and other fluxes. The root contains nearly thirty per cent. of *Tannin*, and its curative action is doubtless due to the presence of that agent.

Homœopathists have rejected—rightly or not—all the so-called astringent medicines for the cure of abnormal discharges.

It is a question whether it is right for us to throw out such medicines.

Eclectic physicians claim that it not only cures diarrhœa, but that it "leaves the mucous membrane in a moist, healthy condition," *i. e.*, normal.

As I shall speak of several similar medicines during my lectures, permit me to quote from the second edition of my "New Remedies:"

My attention was first called to the remedy by observing the promptitude of its action in certain cases of diarrhœa, from loss of tone in the mucous membrane of the bowels, or in the discharges which continue after the inflammatory stage of a dysentery. In such instances I have known discharges to cease under the action of Geranium when they had resisted the careful and persevering use of the ordinary homœopathic remedies. One fact arrested my attention, namely, that it was rarely used by intelligent laymen or physicians (eclectic) until the *inflammatory* conditions had passed away; and that if used *too soon*, it was very sure to aggravate the conditions. In this respect it acted very much as does Rheum in the hands of allopathic physicians.

These observations led me to inquire whether there was not something in the medicinal action of astringents that would account for this favorable action under certain circumstances. In other words, could not their curative action be made to accord with the law of *Similia*, and with the law of dose, which is the necessary result of that law.

To illustrate the curative action of Geranium, I here present several cases, which were treated by me or came under my observation:

CASE I.—A gentleman had been troubled for a long time with a copious secretion of mucus about the fauces, obliging him to constantly "hawk" and clear the throat, much to his annoyance. The condition originated in an acute catarrhal attack, which occurred several months before. An examination showed no traces of present inflammatory action; the mucous membrane looked pale and relaxed, and large drops and clots of mucus adhered to the fauces. I used for a reasonable time Mercurius iod., Hepar sulphur, Hydrastis, and several medicines which seemed indicated, but no curative effect was observed. I then prescribed Geranin in the first decimal trituration, two grains to be taken three times a day, and a weak lotion of the same remedy, and as a gargle. In a week the patient reported himself cured.

CASE II.—A lady, aged 45, had been ill with *chronic diarrhœa* for nearly a year. The evacuations were usually watery, with but little pain, contained undigested food, and occasionally traces of mucus. The number of evacuations, daily, varied from four to fourteen. A good many medicines were used, in high and low potencies, but with no permanent curative results. Arsenicum and Sulphuric acid were the most useful. Finally, she became very anæmic, debilitated, and so dispirited that her condition became critical. On the suggestion of a friend who had been cured with the Cranesbill, and with my permission, she commenced the use of the root in infusion. It was prepared by pouring upon one teaspoonful of the powdered root a teacupful of hot water. This, after standing a few hours, was taken as follows: one-third of the quantity every six hours. I carefully watched the case, allowing no other remedy to be taken, and permitting no change in her usual diet. After the third day the evacuations became less frequent and profuse, until at the end of a week or ten days they had become normal. At this time I suggested that the medicine be discontinued, which was done, but resumed again in two days, as relaxation of the bowels recurred. The remedy was continued in gradually decreasing doses for a month, when it was discontinued, and she has since had no return—now two months.

CASE III.—Was one of chronic, exhausting *leucorrhœa*, of a vaginal origin, and attended by no ulceration or abrasion; a mere passive discharge from a relaxed mucous surface. Geranium, ten drops, four times a day, was prescribed, with injections of the same medicine, prepared by pouring one pint of water upon two drachms of the powdered root; the whole to be used during the day—half in the morning, and half in the evening. In two weeks she reported herself as cured.

These cases, together with my observations of its successful use in many other cases, has prompted me to offer the following suggestions in lieu of a thorough proving, which I have not been able to obtain.

It must be remarked by every observing homœopathic physician, that while the opposite school estimate very highly the "*astringent*" medicines, they are but seldom used in our own school.

Let us now proceed to examine into the nature of the action of the so-called "astringents," in order to ascertain if they can be used in a practical manner in accordance with the law of "Similia."

"Astringent" agents are taken from the vegetable and mineral kingdoms. The vegetable astringents comprise Tannic acid, Gallic acid, Kino, Quercus alba et rubra, Rhatany, Statice, *Geranium maculatum*, Hæmatoxylon, Epiphegus virginiana, Trillium, Rhus glabrum, Ribus, Potentilla, Myrica cerifera, Matico, Uva ursi, Chimaphila, Erigeron, Erechthites, Hamamelis, etc.

Among the mineral astringents are Sulphuric acid, Plumbum aceticum, Ferrum sulphuricum, Alum, Zincum sulphuricum, Cuprum sulphuricum, etc.

In the Materia Medica of the opposite school, many medicines are mentioned as astringents which do not belong to that class, but are more properly "escharotics," namely, Argentum nitricum, Kreosotum, and Mercurius corrosivus.

We will first examine the action of astringent medicines as explained by allopathic authors.

It would occupy too much space to give the opinion and explanation of every writer on Materia Medica. We will therefore quote from Dr. Headland, who seems to embody in his chapter on "Astringents" all the most important speculations in vogue in his school as to their physiological and curative action.

He defines astringents in a "General Proposition," as medicines which "*act by passing from the blood to the muscular fibre, which they excite to contraction.*" He remarks:

They do not necessarily act in the blood, although many hæmatics are also astringents. They do not pass from the blood to the nerves. They do not always act by passing out of the body through the glands. As neurotics act directly on nerves, so these act directly and especially on muscular fibre. They cause this to contract, whether it be striped or voluntary, or of the involuntary or unstriped kind. Their action is more readily understood, because it can actually be seen. It takes place out of the body, or in the body—externally or internally. Nearly all astringents have the power of coagulating or precipitating albumen. By virtue of this power they are enabled to constrict many dead animal matters. They affect fibrinous tissues in a similar chemical way. But they seem to effect a further dynamical influence over living tissues, which possibly depends in some way on this chemical property. This dynamical influence is, as I have said, to cause the contraction of muscular fibre. By this all their operations can be explained. Taken into the blood in a state of solution, they pass through the walls of the capillaries to the muscular tissue, by inducing the fibre of the involuntary muscle to contract. Astringents may brace the system and simulate the action of tonics, but as the action of voluntary muscle is short and brief, it requires for its maintenance continual excitation; and unless the medicine is thus continually repeated, the tonic effect subsides. But astringents further contract involuntary muscles; this contraction is slower, but more durable and important in its results. Unstriped muscular fibre exists in the middle coats of arteries, in the walls of capillary vessels, in the lining of the ducts of glands generally, in the substance of the heart, and in the stomach and intestines. Astringents are irritants and poisonous in large doses. But in small doses they constrict and stimulate to a healthy condition those tubes that contain in their coats

the unstriped fibre. By diminishing the calibre of the capillary vessels generally, they promote health and counteract a lax state of the system. By the same action on the extreme vessels they prevent hæmorrhages. By constricting the ducts of the glands they diminish the secretion of those glands, because denying it an exit. By acting on the stomach and intestines they are able to give them tone, to diminish their secretions when excessive, and thus to promote digestion.

The above may be said to embody "all the accumulated wisdom" of the old school in relation to the action of astringents. To the homœopathist it is vague and unsatisfactory. Let us see if we can get any light from further investigations.

We will not stop to consider the chemical action of astringents, either on dead tissues or on albuminous substances. Such action may be termed chemico-mechanical, and does not come within the scope of this paper. Dr. Headland seems to think that, aside from the above mentioned, astringents have another method of action, which he would imply was the chemico-dynamic force. With a strong leaning to a belief in the presence of a dynamic power in drugs, not recognized by his own school, Dr. Headland cannot get rid of a certain materialism, which prevents him from accepting the great truth, that all medicines act in a *dynamic* manner when once taken into the circulation, or even when brought in contact with nerve-matter. I agree with Dr. Headland, however, in his "General Propositions," that astringents do act by passing from the blood to the muscular fibre, which they cause to contract. But is this the *only* way in which astringents act? Must they pass into the blood—be carried through the round of the vascular system—before they are brought in contact with the muscular fibre of the coats of the stomach or intestines? When applied to the lax and debilitated mucous surfaces discharging an unhealthy secretion, is it necessary that the medicine must pass into the blood, and through the circulation, before it acts upon the mucous and muscular tissues of the organ or surface to which it is applied? Such a roundabout way is not necessary. The mere contact of a medicinal substance with the diseased tissue, for the morbid condition of which it is *the* remedy, suffices to effect the cure of that condition. It may be taken up by the absorbents, or enter the capillary system (if applied to the skin), or affect, by its dynamic force, the terminal nerve-filaments.

When brought in contact with such tissues or fibres the astringent principle or dynamic force residing in such principles *causes them to contract.* This contraction of muscular tissue implies more than at first thought appears. Not only does muscular fibre exist in the walls of all hollow organs, the bloodvessels, etc., of the body, but the microscope has demonstrated that it exists in the fungiform papillæ of the tongue; in the excretory ducts of the perspiratory and other minute glands. It has even been maintained by some that the *cilia* of the epithelium was due to the presence of muscular fibrillæ. The astringent dynamic force may therefore modify the physiological action of the minutest as well as the largest structures of the body, and morbid action, wherever muscular fibre exists. In this way it may unnaturally contract the muscular coat of stomach and intestines, the bloodvessels, etc., causing perturbed action of the organs of digestion and circulation. By acting on the excretory ducts of glands it will seriously modify the secretion from such glands, render membranes dependent on such glands harsh and dry, and check the secretion of urine and perspiration. When the medicine is applied locally, either in fluid or solid form, it dries up the natural secretions of the surface, and deprives it of some of its nervous sensibility.

PATHOGENETIC ACTION OF ASTRINGENTS.

1. *Primary Action.*—Astringent medicines act on the muscular fibre of the intestinal tract, bloodvessels, excretory ducts of glands, skin, mucous membrane, in all of which they cause *contraction with a diminution of secretion.*

2. *Secondary Action.*—The loss of tone, the laxity, and undue secretion which follow the primary effects of astringent medicines, is as much the specific effect of these drugs as the latter. Says Dr. Headland: "But as the contraction of voluntary muscle is short and brief, it requires for its maintenance a continual excitation, and unless the medicine is thus continually repeated the tonic effect subsides." This is the case also with involuntary muscle. The contractile effect of the medicine ceases because the irritability of the muscular fibre is destroyed by the large quantity of the drug, or its frequent repetition. The secondary effect, then, of an

astringent is to cause a loss of tone, and a deficiency of normal irritability in the muscular fibre which it affects.

The loss of tone extends also to the particular mucous surface or surfaces for which the drug had a special affinity.

Hence, as a result of the above-named conditions, there will exist distension or laxity of muscular organs, colliquative sweats, morbid discharge from glands, hæmorrhages (passive), abnormal and profuse secretion from mucous surfaces (blennorrhœas). The secondary action of astringents is often observed in the persons of patients under allopathic treatment for diarrhœa and other abnormal discharges from mucous surfaces. While under the first influence of the astringent medicine the discharge is checked, the mucous membrane becomes dry, and its substance more firm. But the reaction is sure to occur, unless the vital force maintains the equilibrium, and the discharge reappears in a more aggravated form, with a corresponding laxity of the mucous tissue. Alum is much used for relaxed uvula, and by singers to "strengthen the relaxed tissues of the throat." But Mialhe observes that the Alum used so largely by public singers maintains the vocal parts in a state of "flaccidity," instead of constringing them. The allopaths are well aware of this secondary action of astringents; for they caution the practitioner against using these medicines in too large doses, or a too long-continued use of small doses. The reason of this secondary relaxation is evidently found in the fact that the dynamic action of astringents upon muscular fibre is not by means of transmitted nerve force, or by an increase of vital force, but is more akin to mechanical irritation, an irritation which wears out the irritability of muscular fibre sooner than any other.

CURATIVE ACTION OF ASTRINGENTS.

The question, How does an astringent medicine cure a diseased condition? can evidently only be answered in one way. Astringents, like all other medicines, cure diseases and morbid conditions and symptoms which are *similar* to those caused by this class of remedies. All medicines cure by virtue of the law of *Similia*, and astringents are no exception. But it must be borne in mind that

we cannot assert, as do the authorities in old-school therapeutics, that one astringent may generally be substituted for another. In fact, their recommendations belie the general rule which they try to establish. By referring to any work on practice, it will be noticed that a certain astringent is recommended for nightsweats, one for diarrhœa, another for profuse mucous discharges from the vagina or urethra, and still another for hæmorrhages.

The truth is, that each medicine belonging to the class "Astringentia" is a distinct entity, having, perhaps, some properties in common with the rest, but at the same time possessing some qualities which cause it to differ essentially from all the rest of its congeners. To meet the demands of a scientific materia medica, each individual of the class should be separately proven, in order that we may see at a glance in what respect it differs from its analogues.

In the homœopathic Materia Medica we have the pathogenesis of very few astringent medicines. They are Alum, Tannic acid, Ferro-sulphuricum, Sulphuric acid, Plumbum aceticum, Uva ursi, Gallic acid, Rhatany, Zincum sulphuricum.

By referring to provings of these medicines, it will he seen that the primary and secondary symptoms of each are mixed together without any attempt at arrangement. If the physician did not possess some knowledge of the physiological effects of the drugs, our provings would give him no correct idea of the manner and order in which such symptoms were evolved.

So too in the "clinical indications" prefixed to each remedy, the same want of order is manifest. They are recommended for diarrhœa and constipation, for spasms and paralysis, and so on, leaving the student in a maze of uncertainty, wondering how a medicine can be used for conditions directly the opposite.

Unless we take cognizance of the primary and secondary actions of medicines we cannot reconcile those apparent discrepancies. Those who are familiar with my teachings in relation to law of dose, as based on the dual action of medicinal agents, will readily understand the following propositions, as explanatory of the curative action of the class of medicines under consideration:

PROPOSITION I.—*All astringents primarily cause contraction of muscular fibre in some portion of the body, together with a diminution of secretion from the glandular and mucous tissues.*

Therefore, astringents are primarily homœopathic to similar conditions, occurring as the results of disease.

PROPOSITION II.—*All astringents cause secondarily a diminution of tone and laxity of muscular fibre, with a similar condition in glandular and mucous tissues, and consequent increase of secretion even to colliquative discharges.*

Therefore, astringents are secondarily homœopathic where such conditions occur in the organism, and have been produced by the primary conditions before mentioned.

GNAPHALIUM POLYCEPHALUM.

This many-headed Everlasting was first introduced into our practice by Dr. Woodbury and others of Boston. Its sphere of action appears to include certain *nerves of the face and lower extremities*, and the *mucous membrane of the bowels*. The provings show it to cause an intermittent *neuralgia* of the superior maxillary nerve of both sides, and an occipital *headache*, with shooting pains in the eyeballs. Dr. Banks, selecting the remedy from its symptom, "intense pain along the sciatic nerve, following the larger ramifications," cured several cases of *sciatica;* and Dr. Woodbury has lately reported a case cured. By reference to the provings, you will see that the pain is attended by *cramps* of the calves and feet, and a *numbness* which takes the place of the pain at times.

It has been used successfully in *colic*, evidently *flatulent;* in *morning diarrhœa* of dark-colored, liquid, offensive stool in children; also in *cholera morbus* and *cholera infantum*, by Dr. E. Gamny, of New York, with the symptoms recorded in the pathogenesis. It seems to faintly resemble Colocynth and Veratrum album.

GOSSYPIUM.

This medicine is prepared from the root of the Cotton-plant. The first mention of it was in allopathic journals, where the statement was made that an infusion was commonly resorted to by the blacks of the South, then slaves, for the purpose of causing abortion.

It was asserted that its use was generally attended by the desired result. Soon after the country was flooded with preparations of the drug—fluid extracts, solid extracts, Gossypin, etc., all recommended in cunning words for the criminal purpose above named. Thereupon, every unscrupulous woman used, and unprincipled physician prescribed the drug, until an enormous quantity was sold yearly. Although no authenticated cases of miscarriage from its use ever came to my knowledge, and although reputable physicians of both schools in the South denied that they ever observed any such effects, I have no doubt hundreds of barrels of the fluid extract were sold yearly.

It was the fashion and the rage of the hour, and the money spent for the drug would have endowed a foundling asylum in every State of the Union.

It still retains its reputation, although in a less degree. That it does cause miscarriage in weakly women may be true, but that it uniformly does I cannot believe.

In the hands of the homœopathic school it has proven a beneficent remedy, and is capable of further development. The late Dr. Williamson, whose zeal for the improvement of our Materia Medica was never exceeded, made several provings, and used it in many diseases. He considered it analogous in action to Apis, Bryonia, Sepia, Secale, and Sabina. It also resembles Cimicifuga, Ustilago, and Pulsatilla.

Its pathogenesis proves that its sphere of action includes the *internal and external genitals*, and the reflex nerves connected therewith.

It causes, and has also cured, *anorexia* and *nausea* at the time of the menses; *morning vomiting* in the early months of pregnancy, with violent retching, tendency to fainting, soreness of the uterine region; the nausea appears on *waking*, and the vomiting on first

raising the head; only a thick fluid and a little bilious matter is ejected, with passage of wind both ways.

Dr. Williamson reports cases of *amenorrhœa, dysmenorrhœa,* and *menorrhagia* cured by Gossypium.

I have prescribed it successfully in *scanty menses,* painful or painless.

In *amenorrhœa,* with anæmia, gastric derangements, and debility, it has seemed to act well.

It has been recommended for *sterility* from uterine torpor; for *lingering labor* from the same cause, where it is said to cause *painless expulsive efforts* (?).

Many of its symptoms remind me of Ustilago, especially the skin symptoms. It has some relations with Secale.

It causes itching, with small tubercles of the labia and contiguous tissues.

It may be that you will find it useful in many other uterine disorders, but it needs further provings and clinical experience to confirm its value.

The tincture and lowest dilutions have been found most useful.

GRINDELIA ROBUSTA.

This is a small, herbaceous plant, with perennial root. It belongs to the natural order *Compositæ.* This species and the *Grindelia squarrosa,* which is often mistaken for it by herb gatherers and druggists, is found on the plains of the Pacific Slope. The whole plant, like the *G. squarrosa,* is permeated with a peculiar resin, which is most abundant in the flower-heads.

The Grindelia robusta has been strongly recommended as a remedy for chronic bronchitis and asthma. It has also been successfully used in the treatment of gonorrhœa, gleet, and other mucous discharges. Dr. E. A. Gatchell, of Milwaukee, tells me that he has found Grindelia, in the form of a lotion, a sovereign application in itching or painful erythematous eruptions. It relieves the unpleasant sensation, as if by magic, and by preventing the scratching and rubbing promotes the cure. It has given relief when all the usual remedies have failed. He finds it also useful in relieving the effects of mosquito-bites. A lotion made by mixing one

part of the fluid extract or tincture in ten parts of water is all that is required.

Grindelia was first recommended as an antidote to the poisoning by Rhus tox. It is applied to the skin, either in the form of infusion or dilute tincture. No complete provings have been made with either species.

It seems to possess the same soothing effects on the mucous membranes as on the skin, in vaginitis, accompanied by violent itching, burning, with rawness and redness. An injection of ʒj to a pint of warm water acts happily.

The following case is from an eclectic journal:

Mrs. ——, aged fifty-three, married thirty-two years, mother of six children, plump, somewhat inclined to obesity, of very fair and florid complexion, generally speaking healthy and of uncommon strength and endurance, bodily and mentally, had since her menses made their first appearance, always had a very copious flow, lasting three to four days, and the menses with great regularity returned every twenty-one days. About two years ago she underwent the "change of life." Immediately after the menses stopped, vaginitis set in, and she says that the burning and itching she suffered day and night is beyond all description, and it had resisted every remedy that came within her knowledge. The flow of a whitish acrid fluid had also persistently continued. When the case was explained to me I recollected that Grindelia robusta was highly recommended. I therefore put up

℞. Extractis grindeliæ robustæ fluidi, ... ʒj.
Aquæ pluvialis, ... ʒiv.

M. S.—Apply an injection with a common glass vaginal syringe twice or thrice a day, and apply the mixture to the parts inflamed externally by wet cloths changing them three to four times a day.

About a week afterwards patient reported success to my wife, saying, "I have spent the first few days for years without suffering." She was advised to keep the mixture about the house, and to apply it at the appearance of the slightest symptom of vaginitis.

There are two species of Grindelia now used in medicine, the Grindelia robusta and Grindelia squarrosa; both are natives of California. They are physically remarkable for the large amount of resinous matters which they contain. Belonging to the same *genus*, their action on the human organism is quite similar. We have already a few suggestive provings and a large amount of clinical experience obtained by their empirical administration. As with other medicines, the provings verify the trustworthiness of

the clinical experience. The sphere of action of Grindelia appears to be principally manifested upon the *mucous membranes* and the *nervous system.* As a general rule, this is the case with all the gum-resins. Taken into the system they have to be carried *out* through the mucous surfaces whose function is to *eliminate.* Consequently the bronchial mucous membrane, and that lining the genito-urinary tract, are usually chiefly affected. But we know that in case such alimentary organs refuse to do their office, the drug imprisoned in the system attacks other portions of the organism. Therefore we find that Grindelia, as well as Copaiva, Terebinth., Balsam peru, Sambucus, and Stannum, often cause severe nervous symptoms.

The Grindelia robusta has been particularly useful in "humid asthma," a disease which generally originates in catarrhal bronchitis. At first the dyspnœa depends on an abnormal accumulation of mucus in the smaller bronchi; it is tenacious and difficult to detach. The patient feels and *knows* that if he begins to expectorate he will get relief. As the disease becomes chronic, the "strain" on the respiratory nerves leads to such irritability that *spasm* results. This is called "spasmodic asthma." Grindelia robusta corresponds to these symptoms and conditions, and its provings already shadow forth a similar symptomatology. In purely nervous asthma, or the so-called paralytic asthma, where the bronchial tubes are so relaxed by paralysis of their circular muscular fibres that inhalation is easy, but *expiration* difficult, I do not think Grindelia will be found useful.

But there is a dyspnœa due to paresis of the respiratory nerves which obtain their vitality from the spinal cord, in which Grindelia is especially indicated. In a recent proving which I communicated to the "North American Journal of Homœopathy," occurs the following symptom: "*A fear of going to sleep on account of loss of breath, which awakes him.*" This symptom occurs in chronic asthma sometimes, and *very* often in *cardiac asthma.* It is due to deficient spinal innervation. We have but few remedies which meet this symptom. Lachesis has been used, also Arsenicum, Nux, and Ignatia, but Strychnia[6] is better than all. Soon after that symptom was published Dr. Wesselhœft, of Boston, greatly relieved a case of dyspnœa from heart disease with this

particular symptom. He gave a low dilution. Eucalyptus, a kindred remedy, has relieved a similar symptom, also Tart. em.

The curative dose of Grindelia in asthmatic affections has a very wide range. Eclectics and allopaths report brilliant cures from teaspoonful doses of the strong fluid extract down to a few drops of the tincture. I have greatly relieved acute catarrhal asthma, even in children, with the lowest dilutions in drop doses.

The dose is of small consequence so that it does not reach the point of causing medicinal aggravation—a result which I have rarely seen in any remedy, and which is generally a myth.

Many cases of chronic bronchitis and cough, with muco-purulent expectoration, after pneumonia, has been cured by this medicine. It will doubtless prove useful in catarrhal conditions of the urinary and genital organs.

The Grindelia squarrosa developed in some recent provings very severe eye symptoms, resembling acute iritis, and a Dr. Fishe, in the "Pacific Medical Journal," reports several cases cured by its use internally and externally. He used appreciable doses. It may prove to be a very valuable agent.

In the catarrhal stage of pertussis, when the secretion of mucus is profuse, and there is dyspnœa therefrom, Grindelia gives relief sooner than Ipecac. or Tart. em.

In many forms of *renal* or *cystic* diseases, when mucous discharge is the prominent symptom, it will effect cures, but it must be taken perseveringly for some time.

GYMNOCLADUS.

This is a tree, the fruit of which gives it its name of Coffee tree, from its resemblance to the Coffee bean, for which it has been used as a substitute.

Belonging to the *Leguminosæ*, it is botanically a relative of Baptisia and Robinia. It has not been much used in practice. It seems to affect the head similarly to Cimicifuga. It has caused erysipelas of the face. An old physician, I think the one who assisted in proving it (Dr. Sellers), informed me that he always found it curative in a *sore throat* in which a dark livid redness was characteristic. I quote a portion of Dr. Sellers's original letter to Dr. Hering:

CINCINNATI, December 9th, 1844.

DEAR SIR: I herewith send you a couple of pods of the Gymnocladus, commonly called the Kentucky coffee tree, or fly-poison, the beans of which are roasted and used for coffee in some parts of Kentucky, while the pulp that surrounds the bean in the pods is used for poisoning flies. I was induced to suppose it might be a valuable addition to our medicines from tasting the pulpy substance in the pods. About two weeks ago, while eating a small portion of it, I perceived a burning, drawing sensation in the roof of my mouth, extending to the uvula, which, however, soon passed away. I immediately commenced preparing a saturated tincture. On Sunday, December 1st, about 8 o'clock P.M., I moistened some sugar of milk with one drop of the tincture, and took about one-sixth of it. In half an hour, perceiving no effect, I took another dose of equal quantity. In less than half an hour I began to feel the same sensation that I had experienced when eating the pulp. By about 8 o'clock in the evening the symptoms were as follows: Headache, fulness and pressure in and over the eyes, in the forehead, and extending to the top of the head, with occasional shooting pains; scraping burning in the roof of the mouth, extending to the uvula; drawing pain in the uvula and tonsils, particularly the right side; right tonsil very much inflamed and of a purple color; sensation of fulness in the stomach, with slight nausea; pain in the lower parts of the abdomen; pain in the small of the back. By Monday morning, December 2d, these symptoms had all disappeared, leaving a tickling in the throat, producing a cough, which continued to increase all day, and in the evening was one of the worst hard, dry coughs I ever had. By Tuesday morning, December 3d, the cough had almost entirely left me (without having taken anything to arrest it), and by evening I was entirely well. I intended prosecuting my experiment, and should have commenced again taking it yesterday but for sickness in my family. I do not know of this tree ever having been used medicinally in any practice. If you know anything about its properties I shall be pleased if you will inform me; or if you can give me any information as to the best mode of preparing or testing it you will confer a favor on,

Yours, most respectfully,

CHAS. SELLERS.

Dr. P. H. Hale and Dr. Delamater have used it in several cases of sore throat similar to the above described with excellent results. Dr. Delamater says he considers a bluish appearance of the throat characteristic.

The following remarks of Dr. Hering are here presented as the best indications which I can obtain:

We may give the Gymnocladus in cases of cough accompanied or followed by tonsillitis; in erysipelas of the face where the malady is not reached by the better-known drugs; even in scarlet fever, in so-called hives, and (where I expect the greatest utility from it) in typhoid fevers, remittent or intermittent epidemic fevers with a typhoid character, or, as I would prefer calling it, with the erysipelatous character. We have had such epidemics in America, and had great diffi-

culty in finding the true specific for the whole epidemic, and have been obliged to tumble about between the narcotic Solanæ, the Rhus and mineral acids, and the patients have lingered, notwitstanding the greatest care, for weeks. This ought not to be so, and I hope if such epidemics ever appear again the Gymnocladus will be found highly useful. If this should prove to be the case, all the labor and suffering of the provers will be insignificant in comparison with the relief of a single patient. If this happens next year, in ten or a hundred years, what is time?

The curious are referred to Dr. Hering's elaborate analysis of these provings, in the first volume of the "North American Journal of Homœopathy," 1851.

GUACO.

This is one of those South American plants which possess curative virtues, doubtless of a specific character, worthy of our close study. The plants of the tropics are supposed to be far more virulent than their relatives of the temperate regions belonging to the same botanical family.

This climbing plant, "Liane," is known to botanists by the name of *Mikania guaco.* It has been asserted by some writers that there is a probability that the notorious "Cundurango" is the same as the Guaco. The similarity in the alleged curative action of the two plants, and their similar appearance, doubtless gave rise to this supposition.

The Guaco has been but little used in this country. I have never used it in my practice, nor do I know of any clinical experience with it in the hands of my colleagues. Dr. Elb, of Dresden, Germany, published provings and a pathogenesis of the medicine, but a translation has not been made.

Dr. Elb recommends it very highly in *spinal diseases*, and gives us full indications for its use in those affections. These indications you will find in my "Symptomatology of New Remedies." Its action seems to be analogous to Lachesis, Naja, and Crotalus. It has a great reputation in South America as an antidote to *bites of venomous serpents.* It has been used successfully in the treatment of *cholera, syphilis, old ulcers, apoplexy, paralysis*, etc.

GUARÆA.

This medicine is prepared from the bark of a tree growing in the Antilles, and called by the natives "Ball-wood." The pathogenesis published in the "Symptomatology of New Remedies" is made up from provings by Dr. Petroz.

Its sphere of action, as deduced from the symptoms, would appear to include the brain and spinal cord, upon which it acts as an irritant. It also acts upon the bones and the mucous surfaces of the respiratory organs. It has a direct affinity for the nerves of the larynx, and in this respect resembles Lachesis, Drosera, Corallium, Ipecac., and Belladonna. It somewhat resembles the remedy last treated, the Guaco, in its similarity to the symptoms of serpent-poisoning.

Among the diseases which it is said to cure are *spasmodic cough, asthma of Millar, conjunctivitis, lupus, dysentery, fetid lochia, inefficient labor-pains, menorrhagia, chronic constipation, intermittent fever, dry eruptions, hysterical tetanus, convulsions of children, paralysis,* and *caries of the bones.*

I am not aware that American physicians have used the Guarœa to any extent, and I have had no personal experience with it.

HAMAMELIS VIRGINICA.

This is an indigenous shrub, sometimes called Witch-hazel, Snapping hazelnut, Spotted alder, etc. It consists of several crooked, branching trunks from the same root, from one to two inches in diameter, ten or twelve feet in height, and covered with a smooth, gray, and spotted bark. It is a much larger shrub than the edible hazelnut, which has a straight trunk, not spotted, but brownish. The Hamamelis virginica grows in almost all sections of the United States, especially in damp woods, flowering from September to November, when the leaves are falling, and maturing the seeds the next summer. The bark and leaves are the parts used in medicine. They have a pleasant, aromatic odor, and a bitter, astringent taste, leaving a sense of pungency and sweetness in the mouth. Water extracts their virtues. The shoots are used as "divining rods" to discover water and metals under ground,

by certain adepts in the occult arts. They have been used, also, by certain superstitious quacks for the cure of old ulcers, etc., by rubbing them on the diseased surface. Strange as it may seem, cures are alleged to have been made in this manner. There has always been a large amount of superstition connected with this shrub. The popular preparation known as "Pond's Extract of Hamamelis" is made from the leaves and twigs, by a process of distillation. It is now used by all schools of medicine as an anodyne application. It cannot be expected, however, that it will relieve or benefit all the diseases mentioned on the extensive labels of the manufacturer, and the physician who pins his faith thereupon will be disappointed.

The portion used in medicine is the bark of the branches and roots. The leaves and small twigs contain a proportion of the qualities of the shrub. A concentrated principle is obtained from the bark, and known as *Hamamelin.* It does not contain *all* the properties of the tincture. The article known as "Pond's Extract," also the "Distilled Extract," prepared by some pharmaceutists, is largely used in our school, administered internally as well as by external application. For internal use, however, we should use the tincture of the fresh bark.

The Hamamelis has been used in homœopathic practice for about twenty years. Several physicians claim the honor of introducing it into our practice, among whom are Hering, Okie and Preston. I believe Dr. Okie was the first to write concerning the medicine, but he says Dr. Hering first called his attention to the remedy.

Dr. Hering, it seems, became acquainted with its alleged virtues while attending Mr. Pond, the manufacturer of the "Extract" which bears his name. Dr. Okie says: "Hering proceeded at once, by scientific trials, to discern for himself whether the remedy did or did not possess any or all of the virtues attributed to it by the proprietor." Dr. Hering recommended it for "chronic effects from mechanical injuries," "painful and bleeding hæmorrhoids," "severe pleuritic stitches supervening on tubercular phthisis." He thinks it is like a "union of Aconite and Arnica."

The various provings of Hamamelis, although none of them are as full and thorough as they ought to be, together with the ex-

tensive clinical experience with the medicine in all its preparations, has greatly enlarged our knowledge of its sphere of action since its first introduction. That sphere of action is, however, very limited.

Its action seems to be confined almost altogether to the *venous system of bloodvessels.* It may be called the Aconite of the veins, acting upon those vessels as Aconite acts upon the arteries. Its *primary* action appears to cause a spasm of the vasomotor nerves which supply the veins (if a drug is capable of causing a spasm of those nerves, and not, at the same time, those of the arteries). It also acts as an irritant to those vessels to such an extent as to cause a condition favorable to, if not actually ending in inflammation of their coats. The *secondary* action leads to the other extreme, and we have paresis of those nerves, and thence paralysis of the coats of the veins, leading to varicosis, venous congestion, hæmorrhages, and even structural lesions.

It is *primarily* homœopathic, then, to *phlebitis*, not only of the venous system generally, but of the venous system of the lungs, and the venous side of the heart. It is also indicated for certain anomalous pains (supposed to be neuralgic) which arise from diseases of the veins. In these diseases it should be used internally in the medium dilutions, and not very strong externally.

It is homœopathic, *secondarily*, to venous congestion or stagnation; to dilatation, paralysis, and rupture of the coats of the veins; to varicose ulcers; and many diseases depending on venous obstruction.

When I enumerate the various disorders for which the Hamamelis is recommended, you will see that they can nearly all be included under the above category.

Dr. Hughes, one of England's most acute medical observers, gives in the following quotation some symptoms brought on by its use. They seem to show that in causing contraction of the veins of the head, it indirectly caused some arterial engorgement, a condition not unlikely to follow arrest of venous hæmorrhage.

Dr. R. Hughes, in giving his experience with this remedy, says:

I have the greatest confidence in Hamamelis in phlebitis, in the various forms of varicosis, and in venous hæmorrhage. It is not always successful in phleg-

masia alba dolens, but there is good reason to believe that in this disorder the mischief is as often in the lymphatics as in the veins. In varicose veins of the leg I conjoin its external with its internal use, laying strips of calico soaked in a weak lotion of one part to twenty, along the enlarged vessels, and supporting all with a bandage. The pain is relieved and the veins much reduced in size. In "bleeding piles" the first or second dilution of Hamamelis is a most valuable remedy. In passive hæmorrhage from all parts, whether nose, lungs, stomach, or bowels, I have the utmost confidence in its use. I think that the hæmorrhages it cures depend rather upon the state of the bloodvessels than on that of the blood. Its value in varicosus, and the absence of any report of its curative action in purpura, point in this direction. The following, moreover, is a case in point: I was treating a young lady suffering from a complication of disorders, amongst which were almost daily epistaxis and throbbing headache. To check the epistaxis, I put a few drops of the mother tincture of Hamamelis in a tumblerful of water, and ordered a dessertspoonful to be administered alternately with the China, which was being administered for the headache. The first dose of Hamamelis was followed by a flushing of the face, the most distressing throbbing, aching, and sense of fulness in the head. These symptoms gradually subsided, and the intermediate dose of China was taken without any appreciable result. The second dose of Hamamelis, however, was immediately followed by the same symptoms as at first, the head feeling as if it would burst. I stopped the remedy, and the epistaxis recurred next morning as usual. In a day or two I resumed it, giving it in the third decimal dilution. Again the dilatation of the cerebral vessels took place, though the symptoms were not as severe as on the first occasion. This patient has been very sensitive to all medicines, but I see no reason to suppose the effect of Hamamelis upon her to be exceptional otherwise than regards quantity.

In *menorrhagia* I think Hamamelis less often useful than Ipecacuanha, Sabina, and Secale. In hæmaturia, also, it yields to Terebinthina and Ferrum muriaticum, probably because this hæmorrhage is dependent more frequently upon the state of the renal or vesical tissue, than upon that of their bloodvessels.

Of the remedies mentioned by Hughes as controlling hæmorrhages none affect directly the veins as does Hamamelis.

Of its real action on the *brain* we know but little. It may be supposed, from analogy, to cause the same conditions there as elsewhere. Dr. Hughes's experiment seems to prove that some arterial congestion may be temporarily caused by it.

The symptoms would seem to indicate a condition of passive congestion or venous stagnation. In headache, preceding epistaxis, this may prove an excellent remedy. Many cases are only relieved by bleeding from the nose. The Hamamelis acts by removing the *cause*, and in this manner arrests the bleeding, if present, and removes the condition upon which it depends. We

have but little clinical testimony as to its value in cephalalgia. It will probably never be found as useful as Belladonna, Aconite, or Gelseminum.

We have found in the various journals nearly a hundred cases of *epistaxis*, some of them of an alarming character, which were promptly arrested by the use of Hamamelis in some form. Dr. Belcher cured a severe case in a boy aged fourteen, with Hamamelis 3d, one-eighth of a drop. The bleeding had not returned several months after.

Dr. Preston, in an article on venous hæmorrhages, writes:

> Epistaxis, or bleeding from the nose, forms the most common hæmorrhage of childhood, and in a great proportion of cases is simple and perfectly harmless. When it is dependent upon active congestion it is usually arterial and proves its own remedy; when it is the result of mechanical congestion, or forms one of the developments of the hæmorrhagic diathesis, it is passive and probably venous.

Dr. Preston gives an interesting case illustrating its treatment with Hamamelis:

> An old gentleman, hemiplegic, who had been subject to occasional attacks of hæmorrhage from the nose, often profuse and very debilitating, and on several occasions requiring Mr. Abernethy's operation of plugging the nostrils before it could be stopped. He had now been afflicted at intervals of several days with slight oozing of very dark blood from the Schneiderian membrane, particularly three times a day, shortly after meals, corresponding to the rhythmical exacerbation of the pulse. After the afternoon meal the bleeding was very profuse. He was able to walk about, but complained of feeling very weak and faint, with occasional vertigo or confusion of ideas; his countenance was pale, and his pulse decidedly hæmorrhagic. I ordered him home, and to keep perfectly quiet; to use a strong nourishing diet, with wine at each meal, and gave him China and Hamamelis 3d, in alternation, every two hours. I was sent for to his house in the afternoon and evening, and the bleeding had been almost constant, but slowly oozing from his nose since he got home; by evening he was too weak and faint to sit up, but lay in bed with his head raised; gave China and Hamamelis 1st. The hæmorrhage increased, however, all the next day, when small pieces of linen were wet with Hamamelis and rolled funnel-shaped and pushed up the nostrils. No more hæmorrhage, and in three days he was able to go about his business.

It has been used with benefit in *hæmorrhage* from the buccal cavity, and that form which occurs after extraction of the teeth. Also for *scalding* of the tongue and mucous membrane of the mouth and fauces.

Dr. Holcombe once reported two cases of *conjunctivitis* treated

successfully by Hamamelis internally, and as a collyrium. In one case it was caused by the contact of a "puff of flame," in the other by a "splinter in the upper palpebral conjunctiva."

It would seem to be indicated for the effects of injuries to the eye. In whooping-cough the eyeball becomes congested from the violence of the concussion, and small vessels are ruptured. Hamamelis soon dissipates these *extravasations*. Pond's Extract has quite a reputation for *black eye* from a bruise.

There is a condition of the fauces and throat which might not inaptly be designated a *varicose* angina. The posterior fauces, uvula, and pharynx are of a bluish hue, caused by distended veins which ramify on the surface; this causes a fulness, with cough, and pain on swallowing, and sometimes hawking of dark-colored blood mixed with mucus. In cases of this character the internal and topical use of Hamamelis proves curative.

In *hæmatemesis*, when the blood is dark and grumous, and arises from derangement of the liver or spleen, this remedy, in appreciable doses, will promptly arrest it. In hæmorrhage from the stomach, from ulceration, or other causes having a local origin, I prefer Sulphuric acid.

In *melæna*, or hæmorrhage from the bowels, it is not useful unless caused by a *congestion of the portal system*, either direct or indirect.

Such hæmorrhages often occur during the progress of *hepatic* derangements, and arise from ruptured portal veins. The hæmorrhage may come from high up in the intestines, or, what is more commonly the case, from the hæmorrhoidal veins.

In fact, it is in *congestion*, *inflammation*, and *bleeding* of hæmorrhoidal vessels that the Hamamelis has gained its greatest popularity. It is prescribed internally in doses suited to the severity of the case (a less quantity in inflammation and congestion than in actual hæmorrhage), and a lotion of Pond's Extract, or dilute tincture, applied externally or injected into the rectum. It is claimed by eclectics that this anti-hæmorrhagic power is due to the large percentage of Tannin it contains.

In 7000 grains organic and inorganic matter found in the bark, 400 grains is Tannin, 1038 is a "particular bitter principle," and the balance consists of the ordinary solids found in all vegetable

substances. The chief medicinal power doubtless lies in the bitter principle. The Tannin plays but an unimportant part in the curative action, for Tannin alone, nor Gallic acid, have any such specific action on the system.

Dr. Preston asserts that he succeeded in checking hæmorrhage from ulcerating carcinoma of the bowels by means of this remedy.

In certain kinds of *dysentery*, many physicians use it with good results. The testimony is, however, that the blood is usually *dark*, in clots or patches, scattered through the mucus. (On the contrary, in the dysentery of Ipecac., Aconite, and Erigeron, the blood is bright red and often fluid.)

In *hæmorrhoidal dysentery*, which is really a phlebitis of the hæmorrhoidal vessels, the Hamamelis is truly specific. In this disease it rivals Aloes, with which it possesses many qualities in common.

In *diarrhœa*, the Hamamelis is said to have been found useful, but the indications for its use are not ascertained. It will require more extended provings and clinical experiments to establish its applicability to diarrhœa. I would suggest that it might be useful in mucous and serous discharges arising from derangement of the portal system.

It is in *hæmorrhoids* that the Hamamelis has achieved some of its greatest victories. It seems to have extraordinary powers over this disease, not only as externally manifested in the form of hæmorrhoidal tumors, but against the primary cause, which is often located in the portal system. It has been used in this affection from the earliest history of our country. The aborigines first imparted a knowledge of its curative virtues to the first settlers. It is mentioned as a remedy for piles, used *externally*, in the works of the early "*botanic*" physicians. When Pond first sold his extract, it was recommended particularly for this complaint. Dr. Hering was Pond's family physician, and was induced by him to try its efficacy in some diseases. In 1850 Dr. Hering informed Dr. Bushman, a pupil of Dr. Okie, that he had used it successfully in "painful and bleeding hæmorrhoids." Dr. Okie was then induced to try its virtues, and in a letter to Hering, published in 1853, he says:

I next made use of the Hamamelis in a number of cases of *painful* and bleed-

ing piles. Those cases in which it has proved most beneficial in my hands are characterized by burning soreness, fulness, and, at times, rawness of the anus; in the back a weakness or weariness, or, as the patients graphically express it, "Doctor, my back feels as if it would break off." The hæmorrhage is generally profuse, and I have in several instances seen this latter symptom cured completely, with shrinking of the overloaded hæmorrhoidal vessels so that the full, pouting look of the anus was changed to its own more natural, demure pucker, while the burning and itching, depending more upon cutaneous irritability, or some herpetic taint, still remained. I have here, likewise, made a wash of the remedy, applying it externally, while giving it internally in the more dilute form. Mr. T., a highly respected agriculturist, somewhere in the fifties, had been troubled with painful and bleeding piles for a number of years. On examination I found the anus surrounded with a crop of tumid hæmorrhoidal veins, bluish in color, and the whole anus encircled with a red, erythemic halo. I found that he suffered with "backache," has a "pasty" mouth, digestion tolerable, was not much constipated. I gave Hamamelis, first dilution, six drops night and morning, and applied a lotion of one-third of the remedy and two-thirds distilled water. In a fortnight he called again, and I found him much relieved. I repeated the prescription, to be taken once a day, since which time he has remained well.

In hæmorrhoidal troubles, the true analogues of Hamamelis are Aloes, Æsculus, Collinsonia, Nux vomica, Sepia, and Sulphur. It is used externally as a cerate, ointment, and lotion, and at the same time prescribed internally.

I do not believe it capable of curing long-standing cases of hæmorrhoids, even when they are not of a character requiring surgical treatment, and for the reason that Hamamelis is not a medicine that affects the system deeply or profoundly; its effects do not tend to assume a chronic character. In the treatment of chronic cases its proper sphere is that of an *aid* to the profounder curative action of Nux, Sulphur, Nitric acid and Podophyllum. In this respect it resembles Æsculus, Aloes, and Collinsonia.

Its action on the urinary organs has not been sufficiently studied. Does it cause and cure the same conditions in the kidneys that it does elsewhere? Is there a venous engorgement of the kidneys calling for its use? Can we diagnose a venous hæmaturia from one of arterial origin? Is there a phlebitis of the kidneys? Is Hamamelis indicated in any stage of Bright's disease?

I confess I am unable to answer these questions. Nor can they be answered till we shall poison animals with Hamamelis, and then make minute dissections and microscopical examinations

of those organs, as Dr. Jacobi, of New York, did in his experiments with Turpentine.

Many cases of *hæmaturia* and "bloody urine" have been reported cured by Hamamelis, but of their exact nature we are ignorant. I prefer Millefoil, Turpentine, or Gallic acid. I doubt its value in any inflammation of the bladder or urethra, although it is recommended in *strangury* and *irritable urethra.*

In some of the disorders of the organs of generation of women it has been found curative, namely, in some cases of *metrorrhagia* and *vicarious menstruation.* When the metrorrhagia occurs midway between the menstrual periods, and the blood has all the appearance of venous blood, or has been preceded by venous plethora, it is specific.

It may be useful in *menorrhagia* when the same abnormal condition precedes the flow, but in simple excess of the menses it is not indicated.

When the vicarious discharge is from the lungs, bowels, or hæmorrhoidal vessels, here, too, is the Hamamelis indicated.

In *leucorrhœa* it is a domestic remedy which has always been popular. It is generally used in the form of a decoction of the bark and leaves, or as Pond's Extract. Many of my patients habitually resort to one of the distilled extracts now in use, as an injection in leucorrhœa.

Dr. Paine (eclectic) says he has known Hamamelis to cause "violent *contractions* of the vagina, and a smarting-burning sensation, followed by prurigo." He asserts that it will cure "*irritations* of the vagina." Taking this as indication, I have tried this remedy in *vaginismus.* It did not cure my cases, although the patients thought it gave some relief from the abnormal sensitiveness when used as an injection or in the form of a cerate.

In *pruritus,* Pond's Extract will often give relief when used as a wash, but it is not as effectual as a lotion of Borax or Carbolic acid.

Dr. Okie first used it in *ovarian diseases.* He reported a cure of *ovaritis* from a blow on the abdomen. There were violent pains, at times in the swollen and tender ovary, at other times radiating all over the abdomen, producing an agonizing soreness; menses irregular, with an aggravation of the ovarian pains at the

period. There was also exquisite tenderness of the vagina and os uteri, the latter very sensitive and swollen, as was the ovary when touched per vaginam.

It has become a very popular remedy, both internally and as a lotion, in all kinds of *ovarian disorders* with tenderness, pain, and swelling. You will not find it a specific in all cases, or any large proportion of them. The special pathological condition of the ovary calling for Hamamelis cannot at present be definitely stated, but it occurs to me that it may be some trouble with the veins which return the blood from those organs.

Dysmenorrhœa has been treated successfully with Hamamelis, according to Burnett, Pattison, and some others, but I have not heard of its use of late in that disorder. Caulophyllum, Xanthoxylum, and Viburnum are so superior to it that it has probably fallen into disuse.

Dr. Pattison, of England, makes a curious assertion, that Hamamelin possesses a peculiar power almost *sui generis* in assuaging the pain and preventing the periodical sufferings, while the *tincture* possesses none of this power. It is not easy to understand why an "active principle" of a plant can possess power differing from the tincture.

You will find one of the extracts very useful in allaying the pain and tenderness of *varicose veins* in the limbs of pregnant women. I have seen equally good effects from its use, internally and topically, in *phlegmasia alba dolens*, when the pathological condition is a *phlebitis*, and not a lymphangeitis. The two conditions are often confounded, for, as Dr. Preston says, milk-leg is as often an affection of the lymphatics as the veins.

As might be expected, the Hamamelis affects the organs of generation of men. The testicles are homologous to the ovaries, and it has a deservedly high reputation in *orchitis* when arising from injuries (where it rivals Arnica) or from idiopathic inflammation. It is not as useful in orchitis from metastasis of gonorrhœa, in which case Pulsatilla and Clematis are more appropriate.

The symptoms in Burts's proving indicating its use in spermatorrhœa have not been verified, and unless *turgescence* or *inflammation of the spermatic veins* is at the bottom of the disorder I do not imagine it will prove useful.

In *neuralgia of the testicles*, as well as *ovarian neuralgia*, it may prove palliative, but I have not known any cures performed by Hamamelis.

Cirsocele, or varicosis of the spermatic veins, has been treated successfully by lotions of Pond's Extract, or dilute tincture, the same being given internally.

If there is such a disease as *pulmonary phlebitis*, as suggested by Preston, who surmises that many cases of "quick consumption" are of that character, the Hamamelis ought to prove curative for it.

He supposes it to arise from local injuries to veins in distant portions of the body, or to the absorption of pus into the veins. In the former case I would advise it to be alternated with Arnica; in the latter with Carbolic acid.

Hamamelis has cured *cough* and hæmoptysis, with a taste of Sulphur in the mouth, and dull frontal headache. Also, "tickling cough, with a taste of blood on waking." In *hæmoptysis* it is considered by some to be a remedy *par excellence*, applicable to nearly all cases; but this is going too far. It can never take the place of Aconite, Collinsonia, Cactus, or Lycopus. Dr. Preston ("Diseases of Veins") says:

In general we look upon Hamamelis as a specific for passive venous hæmorrhages, and we have seen it successful in arresting this particular form of bleeding from the pulmonary mucous membrane; but we speak only from a few years' experience, and that of a few observers, and therefore we must be impartial enough to mention a few of those remedies which other practitioners have recommended as useful in the cure of some forms of hæmoptysis: Aconite, Ipecac., Ferrum aceticum, Arnica, Millefoil, etc. Dr. E. M. Payne reports the following case: A young lady, aged 16, was seized while at school, and without any premonitory symptoms, with blood-spitting. The patient was of slender build, light hair, blue eyes, fair complexion, lax fibre, and phthisical diathesis; menses regular and normal. The blood-spitting commenced with a slight hack, and continued, with scarcely a moment's intermission, up to the time of my visit, a period of nearly an hour. I found her lying upon a sofa, calm, with a napkin in hand nearly saturated with apparently pure venous blood, and spitting about the amount of a teaspoonful at intervals of one or two minutes. The blood came into the mouth without any effort. She described it as issuing about ten inches below the right clavicle, in a warm current, making apparently a tortuous course, and at the same time there was a sensation in that region as from the pressure of a hard body. Pulse somewhat accelerated—eighty-five. Ferrum aceticum was given, but caused no improvement in three hours. Millefolium, Aconite, Ipecac., and

Belladonna caused no amelioration. Hamamelis, four drops of the tincture to half a tumbler of water. A spoonful was given. The bleeding immediately ceased, and did not afterwards return. I have never used the Hamamelis successfully in cases of blood-spitting when the blood was of light-red, fluid, frothy in appearance, or raised by much cough.

Do not forget the value of Hamamelis in hæmoptysis, when it is vicarious, from non-appearance of the menses, alone or in alternation with Senecio.

The greatest triumph of Hamamelis has been in the treatment of *varicosus* of the limbs. Dr. Preston, writing on varicosus, remarks:

Homœopathy has, as in many other cases, directed us to a specific remedy which, in my practice, as well as in that of a number of my colleagues in this section of the country, has been attended with uniform success in the treatment of this annoying disease. Since 1851 (six years) I have prescribed Hamamelis in upwards of fifty cases of varicose veins of the lower limbs, and in no single case has it failed to make a decided curative impression; but in the great majority of cases it has, thus far, at least, proved a radical cure. My plan is: First, to bandage the limb tightly, from the arch of the foot to a little above the knee, or to the hips if the varices are above the knee, and the best bandage in my opinion is an elastic silk stocking, manufactured for the purpose. Under this, compresses of linen are laid over the dilated veins, and kept wet with Hamamelis tincture, or Pond's Extract. I give the 3d dilution internally, two or three times a day. Some few cases, with large, indolent ulcers on the tibia or malleolus, have been under treatment a year, but most of them have been cured, or, at least, have disappeared, in less than half that time. The crowning point of its virtues (Hamamelis) rests in its peculiar prompt action in cases of phlegmasia alba dolens, and in varicose veins. In old cases of varicosus I have never seen its equal, and have cured many cases of varicose veins of the leg and foot which had resisted all other treatment for years.

Dr. Belcher reports several cases of varices, in pregnant women, cured by Hamamelis. (See cases under "Organs of Generation of Women.") Dr. Barrows found this remedy a valuable auxiliary in the treatment of a child with the following symptoms: "Inflammation of the femoral vein, with the erysipelas spot near the groin, and over the vein, spreading over nearly one-half the thigh, with flexion of the leg; swelling of the entire leg and foot, with tension; heat and pale appearance of the limbs; scanty urine, staining the linen (albuminous); tympanites; œdema of the whole body, limbs and face. Calcarea, Hepar sulphur, and other reme-

dies were used." (See case in full, in the "North American Journal," vol. vi, page 317.)

The "Homœopathic Review" for April, 1864, contains a case of phlebitis, reported by Dr. H. Robinson, Jr., cured by Hamamelis. The symptoms were: "Great pain in the right leg, from the knee to the hip; leg much swollen, and quite sensitive to the touch. The cutaneous veins were hard, knotty, swollen, and painful. The skin erysipelatous; pulse small and wiry; much thirst and no appetite; bowels costive; urine red and scanty; veins of the abdomen hard, like cords, red and painful. Gave Hamamelis 1st, five drops in half a goblet of water." Cured in ten days.

Some physicians consider the Hamamelis of the greatest advantage in all cases of *articular rheumatism* with swollen and painful joints; as a *local application*, it seems to possess decided anodyne properties. They advise that cloths or cotton-wool, wet in the dilute tincture, be applied constantly to the affected parts. I do not believe it has any curative power over rheumatic affections.

The remedies most closely allied to Hamamelis in hæmorrhages are Lycopus, Collinsonia, Trillium, and Pulsatilla.

HECLA LAVA.

This medicine, made by triturating the lava thrown up from Mount Hecla, was first introduced into practice by Dr. Wilkinson, of London. He narrated his experience in a letter to Dr. Holcombe, who read the letter before the American Institute in 1870.

It appears, according to local observers, that the horses, sheep, cows, etc., in the vicinity of the mountain, became diseased from eating the herbage upon which the scoriæ had fallen. It affects the bones principally, causing immense exostoses, caries, etc., particularly of the bones of the head, *jaws*, teeth, and legs.

It has been used successfully in both high and low potencies in similar diseases by Drs. Holcombe, Helmuth, Cate, and Thompson.

I have had no experience with the remedy.

HEDEOMA.

The plant which I allude to under this name and its common name Pennyroyal, is not the *Mentha pulegium* of Europe, also called Pennyroyal, but the Hedeoma pulegioides, or American Pennyroyal. It is a little singular that since the publication by Dr. Toothacher of the interesting and serious case of poisoning by the oil (see "Philadelphia Journal of Homœopathy," vol. ii, p. 18), and since my mention of it in "New Remedies" ten years ago, no clinical experience with it has been published in this country.

I believe it has been used by some English homœopathists. I have used it in some disorders of women, in which I believe it rivals Sabina.

If you will study the pathogenesis or characteristic symptoms, in Vol. I, you will see that it corresponds to many symptoms of uterine disorders.

The most popular uses of the Oil of pennyroyal are for suppression of the menses, flatulent colic, and effects of a cold. It has been resorted to for the criminal purpose of causing miscarriage, as in Dr. Toothacher's case of poisoning.

The symptoms evolved by the case referred to indicate that it is primarily homœopathic to *dysmenorrhœa, threatened abortion, uterine spasms, uterine hœmorrhage*, and *acrid leucorrhœa.* I make no doubt it is secondarily homœopathic to those conditions in which it is so much used as a domestic remedy, namely: *suppressed menses* from a cold, *suppressed lochia*, and *passive congestion of the uterus and ovaries.*

I am inclined to believe that it affects the spinal cord as an irritant in a manner similar to Turpentine and Tanacetum, and that it affects the uterus through the spinal nerves.

The uterine symptoms are quite notable, *e. g.*, "excessive bearing-down pains, with pressure outward from the whole lower abdomen to the utero-vaginal region; drawing down from the upper sacral spine to the uterus, also from the epigastrium; these pains are periodical, like true labor pains, and almost unendurable, greatly aggravated by movement, and attended by a sense of weakness or paralysis in the limbs; leucorrhœa, itching and burning;

discharge yellow, excoriating; soreness and excessive sensitiveness to pressure over both ovaries."

You may find it curative in *ovaritis* from suppressed menses, or from miscarriage.

The symptoms of the urinary organs are quite important, showing it to be an analogue of Turpentine, Cantharis, Erigeron, etc. It caused suppression of urine, tenesmus, painful urination, scanty urination with frequent and urging desire, cutting-burning pains in the urethra or at the sphincter urinarius, sense of weight when passing water, urine very dark, like black tea.

It seems to have caused *inflammation of the kidneys and bladder*, in fact the whole urinary apparatus. Such inflammatory conditions usually attend metritis and ovaritis. The last symptom—"very dark urine, like black tea"—indicates that *blood* was present in the urine. Such urine is very common after scarlatina, and indicates serious disease of the kidneys. It may prove useful in *urethritis, gonorrhœa, gleet,* and *orchitis.*

It may prove useful in *lumbago,* in *paralysis of the lower limbs* from reflex causes, as uterine or renal disease.

It certainly relieves the *flatulent colic* of children and adults, and may be as useful as Turpentine in *tympanites,* whether from intestinal disease or uterine inflammation.

The dose will vary with the symptoms. For its primary effects, use the 3d to 6th dilutions of the oil; when indicated secondarily, use the 1st or mother tincture from the plant.

HELONIAS DIOICA.

It is to be regretted that botanists are frequently changing the generic names of plants. This plant has had four names. The present one, sanctioned by Professor Gray, is *Chamælirium luteum.* I propose not to change its name, as it would cause more confusion with physicians than with botanists.

In the first volume you will find an account of its common names, which are, unfortunately, the same as those given to the Aletris farinosa.

Provings have been made by Drs. Burr, S. A. Jones, Clark, and Paine. The latter authority is an eclectic, who gave it in large doses. He says:

When taken in doses of from five to fifteen grains it acts as an *emeto-cathartic*, producing a *griping, burning sensation in the epigastrium*, and great activity of the salivary glands. Indeed, I have known the most perfect *salivation* to follow the use of large doses of Helonin. In doses of from one to five grains it produces an *irritability of the stomach, and slight purging, with a burning sensation in the bowels, irritation of the urethra, pain in the kidneys*, which is followed by *albuminuria*, indicating congestion, and large discharges of urine, with slightly increased specific gravity.

It is to be regretted that such vague, general terms were used in the above. Had the symptoms been more minutely described, the observations would have been much more valuable.

The remedies which the Helonias most resembles may be named in the order of their similarity: Aletris, Eupatorium purp., China, Ferrum, Hypophosphites of lime, etc., Hydrastis, Phosphoric acid, Senecio, Sepia, and Lilium.

Although used extensively, and very popular with our school, it has not been sufficiently proven by women, whose organisms are most profoundly affected by it.

CLINICAL OBSERVATIONS.—This medicine is a peculiar and powerful "tonic," or as Headland would have it "restorative." It is considered particularly indicated when the disease has proceeded (1) from diseases of the *generative organs*, (2) or from functional disorders of the *stomach;* hence it is considered valuable in *anæmia* and *chlorosis*, in alternation with Ferrum; and in *dyspepsia*, in alternation with Nux vomica if indicated. It does not belong to the China group, because it has no antiperiodic powers; nor does it cause a hyper-stimulation of the nervous and vascular systems like that powerful drug. Neither does it have much more affinity for the Nux vomica group, for it does not irritate the spinal system. It is more allied to the Phosphates of iron than any other article of the Materia Medica, while at the same time it has some points of resemblance to the members of both groups above referred to. China and Nux vomica, together with their analogues, cause a condition which may be described as increased tonicity of muscular fibre. China brings about this condition through its influence upon the processes by which the blood is formed; it probably tends to augment the quantity of that fluid and to render it richer. Thus, by its own operation upon the nutrition of the heart, and through the agency of the enriched blood, it gives greater

energy to the contractions of that organ; and hence the fuller and stronger pulse not unfrequently resulting from its moderate use. But in anæmia, chlorosis, and some other conditions of the system, China will not improve. Apparently the condition of the blood, or at least the tissues do not respond to the stimulus of the improved blood. Then it is that Ferrum or Nux vomica, given alternately with it, will place the diseased tissues in a condition to be benefited by the circulating fluid, and a cure is soon effected. Nux vomica increases the tonicity of tissues, mainly through its influence upon the spinal system. It is a spinal stimulant, and nearly all its therapeutic effects arise from this action. In a great many cases of atony of any organ or tissue of the body, this medicine will alone effect prompt and permanent cures; but, like China, it will sometimes fail, unless superseded or assisted by the action of China or Ferrum. There are also other instances wherein China, or Ferrum and Nux vomica, will fail to improve the abnormal conditions for which they seem indicated, and the Helonias will here come in play and be found very useful. Helonias enriches the blood through its influence upon the nutritive process; not as Iron does, for Iron is a metallic substance, and a vegetable substance cannot act in the same manner. But Helonias does not act like China or Quinine, for the latter stimulates by its direct, primary action, while the former does not.

Dr. S. A. Jones says:

> Of its efficacy in chlorosis and anæmia I have no positive data; but there is one condition of blood-degeneration wherein Dr. J. A. Macomber employs it with unequivocal benefit, namely, in that profound debility which follows an attack of true diphtheria.

Helonias has also an affinity for a group of remedies, among which stands prominently Terebinthina, Copaiva, Cantharis, Erigeron, Phytolacca, Mercurius, Mitchella, etc. The point of analogy is its action on the urinary organs, causing, by hyper-stimulation, congestive albuminuria and chronic irritation.

A medicine capable of effecting great changes in the nutritive processes must have some general action on the *glandular system*.

The specific action of Helonias on this system is undoubted. We find that it causes excessive irritation of the salivary glands;

excites the glandular system of the stomach, increasing its power of digesting and assimilating food; irritates the kidneys to the extent of causing diabetes and albuminuria, and its action on the genital organs of both sexes indicates that it acts not alone on the muscular structure, but increases the action of the ovaries, testicles, and glandular structure of the cervix uteri and vagina. It will probably be found to act on other glands, as the prostate, inguinal, mammary, pancreas, etc.

Its action on the *muscular system* is not primary, but a result of the increased nutrition brought about by the remedy. The action of Helonias on the nervous system I believe to be generally of a *reflex* character, or secondary.

It is *reflex* when we have, from its pathogenetic action, an irritation of the urinary and genital organs. It is secondary when from the hyper-stimulation of those organs the nervous system has been hyper-stimulated so long that it becomes exhausted, and weak and irritable. The same may be said of the *mental* symptoms of the drug. In its action on the mind and nerves it resembles Sepia, Pulsatilla, Platinum, Lilium, and, perhaps, Cimicifuga. It differs from Lilium in its "desire for solitude." It differs from Cimicifuga in *not* causing choreic movements. You will do well to study its nervous and mental symptoms in comparison with those of the remedies above named. It is a notable fact that the primary mental state caused by all these medicines is one of *cheerfulness*, followed by a condition of continuous depression (Cim., Sep.), or alternate depression and exaltation (Plat., Lil., Puls.).

The head symptoms remind us of Cimicifuga and Sepia, for the pains press from *within upward*, while the pains of Platinum and Ignatia are from above *downward*.

It seems to affect the occipital region, for it has "occipital *headache* with throbbing in the vertex, increased by stooping, and attended by vertigo." This form of headache often attends uterine complaints.

In large doses, it causes intense irritation of the stomach, with *burning* pain, vomiting, and salivation. It ought to prove curative in both idiopathic and reflex gastric irritation. (*Subacute inflammation*, and *vomiting of pregnancy*.)

A thorough proving would doubtless show that this medicine produces a long train of symptoms, beginning in *hyper*-stimula-

tion and ending in *atony*. I have found it very useful in idiopathic diseases of the stomach, and especially in those sympathetic gastric disorders which accompany uterine and renal diseases. Loss of appetite, eructations, fulness, cramp, and painful congestion, with lowness of spirits, are the chief indications for its employment.

The gastric symptoms resemble those of Aletris, and it has cured similar conditions. It has arrested the "obstinate vomiting occurring in dropsy;" the dropsy was doubtless the result of Bright's disease.

The enteric symptoms have not been brought out fully in any proving. It is said to cause *catharsis*, but the special symptoms are wanting. I think you may find it useful in some diarrhœas which attend renal and uterine disorders. It caused, in Dr. Jones's proving, a yellow and mushlike diarrhœa.

The action of Helonias on the kidneys has received much attention and study from eclectic and homœopathic physicians—the former in a crude, unscientific manner, the latter in a more careful and methodic way. Dr. Paine (eclectic) asserts that it causes *congestion of the kidneys with albuminuria*, and claims to have cured *albuminuria* and *glycosuria* with Helonias.

Some homœopathic physicians claim nearly the same power for it, and cures of *diabetes*, *albuminuria*, and *desquamative nephritis* have been reported from its use.

In Dr. S. A. Jones's experiments he observed several facts that are worthy of notice:

(1.) That it is one of the few agents that can render *an alkaline urine acid.*

(2.) That it increases the daily amount of urine. (This increase he thinks is secondary, and that the primary effect is to diminish the renal excretion. This will explain why diabetes and chronic albuminuria have been safely cured by appreciable (crude) doses.) He says "that Helonias is a diuretic in the same sense as Apocynum cann., which I am not prepared to affirm; that it is a renal stimulant I think may be safely assumed. Let not the term *stimulant* mislead. The Helonias stimulation is a condition of debility, *venous paresis*, the result of previous arterial tonic contraction." He adds: "When this remedy is in full action the

kidneys have a *burning feel*, and they *ache*—evidence, I take it, of *venous* congestion, retarded blood-flow; hence the urinary *plus*." If this be true, the Helonias promises well in *diabetes insipidus*.

The object of Dr. Jones's proving, he tells us, was, if possible, to cause saccharine or albuminous urine. To his disappointment it caused *neither!* He says:

> The urine was carefully examined with the microscope throughout the whole research, and the results show that the action of Helonias upon the kidneys is purely functional. There is no evidence of any epithelial desquamation or degeneration, and Helonias as a renal remedy may be classed with Cantharis, and not with Phosphorus and Arsenic. This conclusion by no means negatives the possible usefulness of Helonias in cases of albuminous urine. Renal hyperæmia alone can give this condition; hence the possible efficacy of Helonias.

We may find another reason why he did not get albuminuria or desquamation. He did not take "ten or fifteen grains a day for several days," as Paine gave, but only fifteen grains in all in four days, and not quite three ounces of the tincture during the whole proving of seven days. Had he doubled or trebled the doses he might have got what he desired. Nor is it necessary that we should get albuminuria or saccharine diabetes from proving a drug, in order to use it as a remedy in such affections.

In a paper on Helonias, in the "N. A. Journal of Homœopathy," May, 1875, Dr. S. A. Jones gives, as a result of his recent studies of this remedy, his views of its action in diabetes, as follows:

> In the Helonias diabetes this defective "glycocrypsis" obtains; that sugar which should have been stored up in the liver-cells, as a preparation for ultimate heat and force evolution, slips through this gland, escapes organic chemolysis, and accumulating as a purposeless product it blocks the by-ways of life, and yet again the unceasing vigilance and fidelity of the scavenger is shown by saccharine urine.
>
> This is the kind of diabetes in which the adoption of an animal diet and the exclusion of all the starches effect the most remarkable diminution in the quantity of sugar eliminated, and it is the only diabetes mellitus in which I believe Helonias dioica will be found curative.
>
> From this analysis of an incomplete research I am led to believe that Helonias dioica is homœopathic to albuminuria and to diabetes mellitus, although the objective pathognomonic of these diseases was not evolved in the research, and although the recorded symptomatology of this remedy does not, at this day, present a similimum of either of these diseases.

We do not get glycosuria from Nitrate of uranium, yet clinical experience has proved it to be useful in such cases. All that is necessary is to cause a *pathological* state that is *favorable for* or will *lead to* albuminuria or diabetes. Dr. Jones admits as much in his remarks above quoted.

As to its action on the specific gravity, Dr. Jones's table shows that it *lowers it.* He thinks its primary effect is to *increase the elimination of urea.* He believes that if proven in the dilution it would *decrease* it. "Taken in equal quantities, Helonias is the direct opposite of tea, coffee, and cocoa. In their primary action they retard the elimination process; Helonias does the same secondarily."

Dr. Jones is not inclined to believe the Helonias is a true remedy in Bright's disease, unless it is in a stage which he terms an "ante-desquamation stage." As an example of such a condition, he gives a case with the following symptoms, which steadily improved under its use: "Lowness of spirits, restlessness, burning aching in the lumbar spine, frequent profuse perspiration, urine pale yellow, sp. gr. 1013, acid, gets up two or three times at night to urinate, debility, palpitation when going upstairs, appetite poor, sleep difficult, and not refreshing."

He thinks it indicated in *diabetes insipidus*, dependent upon congestion of the lower third of the medulla spinalis; to which I would add the *diabetes nervosa* of women with uterine disorder.

We have but a few pathogenetic symptoms of its effects on the organs of generation of women. Dr. Clark, of Portland, Maine, asserts that he has noticed the following train of symptoms follow its use in six or eight cases (from Helonias 1ˣ):

Pain in the lower part of the back, through to the uterus, like inflammation, piercing, drawing; breasts swollen, nipples tender, and will not bear the pressure of even an ordinary dress; nipples very sensitive and painful; great uterine hæmorrhage came during the proving and continued until the medicine was discontinued.

The Helonias is one of those indigenous medicines which, from the earliest days of medicine in this country, has had a peculiar reputation—first with the aborigines, then with the early white settlers, and finally with the medical profession in this country—as being a remedy, even *the* remedy, for those disorders generally

termed "uterine," and which depended upon an atonic condition of the organs of reproduction. I regret exceedingly that I cannot present the profession with a proving upon the organism of women. I have given it to healthy women, but never observed any notable symptoms. Primarily, it always increases the tone and physiological activity of the generative organs. I therefore consider it *secondarily* homœopathic to those conditions or diseases for which it has been used so successfully. Were it not so, it could never have been used successfully in the doses usually administered by the opposite school of practice. It would have produced *aggravations*, and been by them considered contraindicated.

Before giving the clinical experience of our own school, I will quote the opinions and clinical remarks concerning the remedy which I find in the records of allopathic literature.

Professor Lee, an acute observer, says:

Numerous trials have satisfied us that it has a specific action on the uterine organs—an alleviate, regulating influence over their functions. Hence, in *amenorrhœa*, marked by general atony, and an anæmic and torpid condition of the system, this plant proves of great service—giving tone to the digestive organs, favoring nutrition and sanguification, and promoting the secretions generally. So, in *leucorrhœa*, associated with similar conditions of the general system, it will be found equally serviceable. Its influence as a uterine tonic is also well marked in cases of atonic or passive *menorrhagia*. Here by imparting tonicity to the muscular fibres of the uterus, and by a stimulating power over the plexuses of the organic nerves which supply the pelvic viscera, the exudation of blood is checked, and the predisposing as well as the proximate cause of the disease removed. If it has the power of obviating sterility and impotence, as is alleged by some writers, it must be by a similar mode of operation. It may be slightly aphrodisiac, but there are no well-attested facts bearing on that point. It is very probable, however, that it may, in common with Senecio and other uterine tonics, produce such effects; but if it does I have no proof of the fact, except what may be drawn from analogy. It is very probable, also, that in cases of *dysmenorrhœa* and liability to abortion, from atony of the reproductive organs, it may prove highly advantageous by a similar mode of action, just as we find in the case of iron and other tonics which improve the general health.

Dr. Coe is very enthusiastic. He says:

No agent of the Materia Medica better deserves the name of *uterine tonic*. The remarkable success attending its administration in the diseases peculiar to females, has rendered it an indispensable remedy to those acquainted with its peculiar virtues. Like the Senecin, it is alike appropriate in the treatment of diseases apparently calling for dissimilar properties, as, for instance, *amenorrhœa* and

menorrhagia. Its alterative and tonic influence will account in a measure for its utility in those complaints. In the treatment of amenorrhœa, it will be found most beneficial in those cases arising from or accompanied with a disordered condition of the digestive apparatus, and an anæmic habit. It has an especial influence on the organs of generation, independent of its general constitutional influence. For this reason it has proved of eminent value in the cure of *prolapsus uteri*, tendency to miscarriage, and atony of the generative organs; sterility and impotence have also been relieved and cured by this remedy.

Certain writers have classed it as an aphrodisiac, and stated that its continued use induces an abnormal desire for sexual indulgence. Such a statement could only have been made in the absence of actual knowledge, and as the legitimate fruit of a prurient imagination. We have probably used Helonin quite as extensively as any other practitioner, and we must confess to a want of sufficient penetration to discover any such results from its employment. The only aphrodisiac we recognize is the natural proclivity of a sensual mind. That the Helonin is a special tonic to the organs of reproduction we are well aware, but only to a normal and healthy extent. Did its action extend further than this, it would be a disease-producing and a not a disease-curing remedy. When a medicine so acts upon a diseased organ as to restore it to a physiological condition, we very naturally conclude that said organ will manifest the fact of its restoration by the resumption of its functional activity. This is precisely the case when the Helonin is employed. If administered for the cure of indigestion, the appetite improves, the food is digested, absorbed, and assimilated, and thus the curative action of the remedy is manifested. If, on the other hand, the case be one of amenorrhœa, sterility, menorrhagia, or impotency, secretion is restored, tone imparted, and the healthful flow of returning stimulus is manifested by the usual physical signs. The sexual appetite is sequent, and not the antecedent of the restoration of the ability of the organs to perform the functions assigned to them by nature.

A portion of Dr. Coe's remarks, namely, that which relates to the effects of curative doses of medicines, is in the main correct; but his general statement contains one great fundamental error, which has ever been the glaring fault of allopathic therapeutics. He states that Helonin is a special tonic to the organs of reproduction but only to *a normal extent;* did it extend beyond this, he remarks, it would be a disease-creating remedy. The old school of medicine has always been wilfully blind to the truth that all medicines may be disease-producing. That a medicine is a "special tonic" to any particular organ is the strongest proof that it is capable, if long continued, even in small doses, of causing disease in that organ. If, then, the Helonias be given for uterine atony, and acts curatively, when that organ has regained its tone, if the remedy be continued, it will urge or *elevate* the physiological functions of

that organ, and induce an abnormal condition, the result of hyperstimulation. If Helonias *is* a special tonic to the organs of reproduction, we do not doubt that, if given to a healthy individual, it would cause an *excess* of sexual desire, congestion of the uterus, ovaries, etc., and even amenorrhœa or menorrhagia depend on active congestion; then, after a time, the irritability of these organs would be worn out, and according to a well-known physiological law we shall have exhausted or atonic conditions of the tissue previously over-stimulated. The conditions and diseases enumerated by Dr. Coe as within the curative range of Helonias are those which it would cause by its *secondary action.* It is capable of producing an almost equal number by its primary action. My theory of dose accounts for the curative operation of the material doses of the allopathic school; the curative action in the lower attenuations is chiefly directed toward those atonic states which it causes secondarily. But if given for its primary effects, it must be given in the middle or higher attenuations, else we should get up injurious medicinal aggravations.

Résumé.—The Helonias is *primarily* homœopathic to the following diseases, when occurring in women of plethoric habit, strong digestion, and great muscular power: Active congestion of the uterus, causing, besides the usual symptoms of that condition, *suppression* of the menses (congestive amenorrhœa); *menorrhagia,* from active congestion; prolapsus or retroversion from congestion; abortion from undue afflux of blood to the uterus. The special *symptoms* which would indicate it in these diseases can only be obtained by a thorough proving. Helonias is *secondarily* indicated and has proved eminently curative in diseases of the reproductive organs occurring in persons of a lax or anæmic habit, and in which there is a loss of normal tone. As diseases of the same name may be caused by opposite states, so the primary amenorrhœa of Helonias may be due to congestion, while the secondary is due to lack of blood and normal activity of the uterus, etc.

My own clinical experience coincides with that of my colleagues, especially in its power of *preventing miscarriages.* It is useful even in those cases which arise from ulceration of the os, with or without a bloody discharge therefrom. But its principal usefulness is in those cases which arise from a uterine atony, which can-

not hold on to the fruit of conception, but allows it to escape at the periods coinciding with the previous menstrual flux; or when the slightest overexertion, or irritating emotion, tends to cause loss of the fœtus. In this respect it resembles Aletris, and is just the opposite of Caulophyllum and Viburnum, which correspond to the *irritable uterus*, with such a sensitiveness of that organ that it is thrown into spasmodic and expulsive action upon the slightest occasion. Sabina, Secale, Ustilago, and Cimicifuga stand midway between the two classes just mentioned.

As a remedy for *sterility* and *impotence* it is held in high estimation. In the absence of such an extended series of provings as to establish such conditions, we may judge from its primary symptoms that the above conditions would result. No remedy causes, primarily, an exalted state of the sexual organs without causing, secondarily, a corresponding depression. Moreover, if you will look over the causes of diabetes cured by Helonias, you will observe that in every case impotency existed. There seems to be a direct connection between abnormal secretion of urine and loss of sexual power. Loss of blood, or of any other secretion, does not seem to have so decided an effect. Now, the drugs which cause the one will pretty certainly cause the other. Phosphorus, Phos. acid, Eupatorium purp., Mercurius, Nitrate of uranium, as well as Helonias, all have this effect, and all are useful in impotency.

Nearly all *functional* causes of sterility and impotency have their origin in the ovaries or testicles. Helonias must cure such conditions by its homœopathic relation to the functional activity of those glands.

We have seen that it stimulates glands to an unnatural activity, which must be followed by unnatural *in*activity. This inactivity would induce loss or deficiency of desire, by acting on the mind in a reflex manner. We see in the mental symptoms a picture of the state in which we find most impotent persons.

With my peculiar views of its action, I would recommend Helonias in the high dilutions in those cases of precocious sexual development into which so many young girls are stimulated by the improper methods of education, diet, and amusements, so much in vogue at the present day. Of course, a persistence in such perni-

cious modes of life would have to be abandoned to allow Helonias to exert its curative action. It may prove to be equally useful in the abnormal irritability of the female sexual organs which occurs at the change of life.

Worn-out debauchees cannot expect to be restored to renewed virility by this or any other remedy, but, when used in a low attenuation, it will aid in restoring to a debilitated system its normal power of reproduction.

As an exciter of venereal desires and powers it should never be used, even if it possessed such powers.

Dr. Holcombe believes it is useful in *prolapsus, retroversion*, and *anteversion*, and that it strengthens the uterine ligaments by invigorating the general system. But I do not see why it may not have a purely local *toning* action. The displacements of the uterus may all be due to *local* weakness, while the general system is strong enough. I think it acts curatively in both cases.

It has been found very beneficial in those pains in the back, with lameness, stiffness, and weight, which are found in many renal and uterine diseases.

HEPATICA.

This plant is found not only in America, but nearly all the world over. Its delicate flowers, of a pale-blue, white, or flesh-color, appear almost as soon as the snow leaves the ground in the spring. Although delicate, small, and inconspicuous, the Hepatica had once an extensive reputation in very serious diseases. The name Liverwort was given it from a fancied resemblance of its leaves to the liver; and the old physicians, who practiced according to the obsolete doctrine of signatures, prescribed it in all hepatic diseases. The plant is scentless. Its taste is insipid, not bitter, but a little astringent and slightly acrid, which latter is disguised by the mucilage contained in the leaves. It is difficult to imagine that it has any great power over the system generally. Its supposed action on the liver I believe to be purely fanciful.

Many years ago it was highly lauded in this country as a remedy for cough and hæmoptysis.

If I should venture to name its analogues in advance of a thor-

ough proving, I would mention Calcarea, Hamamelis, Cistus, Hepar sulph., Senega, Phosphorus, and Stannum.

Nothing definite is known of the action of this plant in disease, and nothing whatever of its effects upon the healthy organism. Allopaths, eclectics, *id omne genus*, tell their patients to drink an infusion of Liverwort, *ad libitum;* but they do not stop to observe if any effect results from such quantities. They advise the same of Hamamelis, yet the homœopathist, by careful observation, has ascertained that not only is the latter drug valuable in diseased conditions of an important nature, but it is capable of causing, in small doses even, notable pathogenetic effects upon the healthy body. A thorough proving of the Hepatica may show it to be a valuable remedial agent.

The first and only mention of the Hepatica in homœopathic literature was by Dr. D. S. Kimball in a paper entitled "Scraps from Practice." He writes:

In 1831–32 I was troubled with hæmoptysis, and a slight recurrence of it in 1836, leaving more or less chronic irritation of the throat and lungs, and two or three years previously, as well as subsequently, for a long time with dyspepsia. Three years ago, when suffering in this way, I commenced using the Hepatica triloba, by chewing a mouthful twice a day and swallowing the juice, and observed the following symptoms to arise from it:

Eyes somewhat sensitive to light; itching and swelling, slightly agglutinated in the morning.

Bloody mucus frequently blown from the left nostril, for three or four days in succession (after using it three days and continuing it). Soreness of the end of the nose at the entrance of the nostrils. Uncommonly free and easy expectoration; the rough, scraping irritation and tickling sensation in the throat and fauces disappears, as also the sensation about the epiglottis and larynx as of particles of food remaining. The accustomed accumulation of phlegm, sometimes thick, viscid, and tenacious, inducing frequent hawking and disposition to hawk, disappear.

The customary paroxysms of coughing, and somewhat abundant expectoration, mostly daily, about midday, a portion of the expectoration being opaque, yellowish, of the consistency of cream—the rest frothy and mucous—disappears. Apparently a much better state of the throat and lungs is induced from its use, much stronger generally, as well as locally, and the irritation of the throat and lungs mostly gone. Digestion apparently more perfect, and a cessation of most of the remaining dyspeptic symptoms.

We have in this fragmentary proving a few suggestive pathogenetic symptoms and several interesting curative effects, sufficient to prescribe the medicine in similar conditions.

In the summer of 1865 I contracted a severe bronchitis, which became aggravated by frequent exposure, until it reached the point of purulent expectoration. An attack of circumscribed pneumonia supervened, which was followed by bloody sputa and the purulent expectoration again. This continued for two months unchecked by Lycopodium, Stannum, Phosphorus, or Sulphur. The expectoration was profuse, yellow, creamy, and exceedingly *sweet*. Some pain and constriction of the right chest. An excessively annoying irritation of the fauces; a tickling, itching, and scraping sensation was present nearly all the time, aggravated by eating, or inhalation of dust. At this period I met with Dr. Kimball's statement, and suspending all medicines used the dried leaves in the same manner. I noticed a mucilaginous taste, followed by some astringency, and a subdued pungent sensation, which it gave the mouth and fauces, a little like that caused by the liquorice root. After using it four days, the expectoration decreased; the troublesome irritation of the fauces improved, and in two weeks had disappeared. It certainly appeared to remove the symptoms of the fauces and throat.

HYDRASTIS CANADENSIS.

I believe I was the first to call the attention of our school in America to this medicine. I mentioned it in an article on the Prevention of Miscarriage, and the Treatment of its Consequences," in the "North American Journal of Homœopathy," vol. viii.

Since that time, very extensive provings of the medicine have been made by Drs. Nichols, Burt, and others. The provings of Dr. Nichols are excelled by none of our modern experimenters.

The remedy was mentioned in 1858, and again in 1863, by Drs. Hastings, Bayes, and Pattison, in the "British Journal of Homœopathy."

The use of *Golden Seal* as a medicine dates back into the dim traditional history of this country, when only the aborigines inhabited the continent. It was known to the first white settlers only through the Indian tribes with whom they came in contact. Notwithstanding its great and deserved popularity among the whites and Indians at an early day, the "regular" practitioner seemed to look upon it with suspicion, and we find small mention of the

Hydrastis in any of the writings of the early authors, with the exception of Dr. Tully, of New England; Prof. Rafinesque, then of Kentucky; and Dr. Barton, of Philadelphia. Each of these men labored hard to substitute active and valuable indigenous remedies for the foreign ones, then as now so much more preferred by the allopathic school. At the rise of the "Botanic" practice of medicine, these remedies—the Hydrastis particularly—were taken up and used extensively. The latter eclectics were not slow to avail themselves of the remedial virtues of this and other indigenous plants. Although their use of this medicine was purely empirical, and based upon unsystematic observations, the success which attended its administration was highly satisfactory, both to patients and physicians.

We shall give the opinions and experience of the earlier physicians in order that its medical history may be understood. The biography of a medicine is as interesting as that of a man. We trace its development through infancy, childhood, and youth, and note the additions which are yearly made to its growth as a remedial agent. We also note, too, how one after another of its supposed attributes fall away and disappear, or how certain traits of character noticed in its infancy become forgotten, and finally reappear in the future development of its history. A medicine cannot be said to have reached maturity until it has been subjected to a thorough physiological proving. In other words, it is in the hands of the homœopathic school alone that a medicine is capable of reaching complete development.

Among the earliest medical writers of this country was Prof. Rafinesque, a scientific botanist and a ripe scholar. He thus writes of the Hydrastis:

It is tonic, ophthalmic, detergent, etc. It is much used in Ohio, Kentucky, etc., for diseases of the eyes; the juice or infusion is used as a wash in sore or inflamed eyes. It is considered a specific by the Indians for that disorder; they also apply it for sore legs, and many external complaints as a topical tonic. Internally it is used as a bitter tonic in infusion or tincture, in disorders of the stomach, liver, etc., and is equivalent to Aletris, Coptis, Frasera, Menyanthes, Sanguinaria, and Jeffersonia. (But none of these is so efficacious for sore eyes, except perhaps the Jeffersonia.) It is said to enter into compound remedies for the cancer, acting as a detergent tonic, and the Cherokees are supposed to use it in that disease, but better detergents are known. The properties of this plant are not yet fully known; it appears to be slightly narcotic and available in many

disorders. Some Indians employ it as a diuretic, stimulant and escharotic, using the powder for the blistering and the infusion for the dropsy.

In this we see the earliest history of a plant as a medicine. Used first for diseases of the eye, much as Euphrasia was used among the early Britons; then noted as an Indian remedy for *cancer*, and supposed to be narcotic. Its use in ophthalmia is still popular; its virtues in cancer forgotten until revived in England by physicians of the homœopathic school; and its supposed narcotic powers proved not to exist.

Howard, writing in 1836, says: "It is very useful in recovery from fever, for dyspepsia, indigestion, sore eyes, ulcers, loss of appetite, etc."

Dr. Barton and Dr. Tully estimated it very highly as a "pure tonic, and as an alterative in diseased conditions of the mucous membranes."

King gives it a prominent place among medicinal agents; reiterates all that previous writers have said about it, with the exception of its alleged usefulness in cancer; and adds that it is valuable in "chronic affections of the mucous membrane of the stomach, intestines, bladder, etc.," all of which will be mentioned under the appropriate heads.

Scudder claims it as peculiarly an eclectic remedy, and remarks: "It seems passing strange that our allopathic brethren have not got their eyes open to its importance, as we believe that for the fulfilling of some indications it has no substitute." I shall revert to Scudder's testimony again in other paragraphs.

Allopathic authorities of the present day almost, if not entirely, ignore this important medicine. Wood, in his "Dispensatory," repeats Rafinesque, but doubts if it is anything more than an ordinary tonic. In his "Therapeutics" and "Practice" it is not mentioned. Stillé does not mention it in his extensive work on "Materia Medica and Therapeutics." Bartholow gives it a good notice.

It is only after a careful study of all the provings that we can arrive at any definite estimate of the sphere of action of a medicine.

After nearly twenty years of experience with Hydrastis and an intimate acquaintance with the physiological experiments which have been made with it by members of our school, I confess that I do not feel like expressing a final opinion on the powers and qualities of this medicine.

However, it is proper that I should give you some idea of its mode of action, as well as its extent, and its curative capabilities.

Its *general primary effects* on the system when taken in material or medicinal quantities by a *healthy* person, will undoubtedly be that of a *nutrient tonic, i. e.*, it stimulates the digestive processes, and increases the assimilation of food. By these means the blood is enriched, and this blood feeds the *muscular* system.

I mention the muscular system because I believe it first feels the increased power imparted by the stimulation of increased nutrition. The consequent improvement on the nervous and glandular systems are natural results. But, as is the case with all so-called "*tonics*," the condition of apparent unusual strength may be only apparent, and will sooner or later give way to the opposite condition, which I shall designate as secondary effects of the drug. The same effects have been observed from China, Quinia, and even Iron. The increased digestive power gives way to indigestion; the increased power of assimilation to deficient nutrition, and apparent strength to real debility. But, if these secondary symptoms already exist from natural diseases, then it is that we get the real curative power of Hydrastis. The question now is all-important: Have we special indications for the use of Hydrastis in cases of debility of a general character?

I believe our provings and clinical experience are now sufficient to furnish such data.

But let us examine the testimony of those outside of our school of practice.

In relation to its general effects on the system, there is no medicine in use in eclectic practice about which there is such general unanimity of opinion. It is universally regarded by that school as *the* tonic—useful in all debilitated states, and under all conditions except that of acute inflammation.

This is to the eclectic school what Quinine is to the allopath, and China is to our own school. The first-named school looks with surprise upon the indifference with which this, their favorite *tonic*, is treated by the rival schools. I have known eclectics in large practice, to rely upon it almost to the exclusion of Quinine or Salicin, in intermittents and other malarious fevers. They usually prescribe one drachm of the tincture or fluid extract, or one or two grains (even as high as six grains) of the Hydrastin,

every one, two, or four hours, as the case seems to demand, and assert that it always acts as a *pure* tonic, and that its effects are not attended with any stimulation of the circulation, or congestion of the brain, as is the case with Quinine. Yet, curiously enough, English homœopathists assert that a "few drops of the mother tincture will cause a physical prostration." It could not do this by its primary action, like China; its secondary effect may be prostration. Drs. Marsden and McLimont state that "one of us has, for upwards of a month at a time, endeavored by experiment to ascertain its pathogenesis; but we have been unable to elicit any very decided symptoms, except upon the sensorium and heart, which were affected for a very short time, by doses of half an ounce and upwards, smaller quantities appearing to pass off without any effect at all." The tincture used by the gentlemen must have been of a very poor quality, or half an ounce would have shown its effect in quite a decided manner. They state, however, that they "know of no medicine which has caused so great an improvement in the general health of our cancer patients as has this, an improvement which, in most cases, has become visible in the bettered expression of the countenances to all who had previously known the patients."

We must rank it, as to its general effects on the nutrient processes, with such medicines as China, Ferrum, Helonias, Aletris, Columbo, and Nux vomica. It differs from each, in many ways, from China (Quinine), in not being a powerful antiperiodic; from Ferrum, in not acting directly on the blood; from Helonias, in not affecting the functions of the kidneys and uterus; and from Nux vomica, in not acting as a stimulant to the spinal cord.

The action of Hydrastis on the *glandular* system must be direct and specific. It acts on the glands of the mucous membranes, namely, the intestinal and gastric. It acts on the larger glands, notably the liver. Its primary effect on the glandular system is to excite to unusual secretion when given to a healthy person.

Its action on all *mucous surfaces* is of a similar character. The natural secretion is at first increased; then it becomes abnormal in quantity and quality. At first clear, white, transparent, and tenacious, it becomes yellow, or thick, green and even bloody, and nearly always *tenacious*. The tenacity of the discharge, allowing it to be drawn out in strings, is analogous to the discharge caused

by Kali bich., Ammon. brom., and Cubebs. It differs from the profuse mucous flux of Stannum, Copaiva, and Amm. mur., which is thick and lumpy, and falls in masses. The distance traversed by the primary mucous flux of Hydrastis passes from simple increase of mucus to erosion and ulceration. Its secondary effects are exhaustion or destruction of the glandular sources of the mucus —a condition in which the mucous surface is dry, glazed, and its functions destroyed.

A muco-purulent, or purely purulent discharge marks the ultimate primary action of Hydrastis. A total arrest of secretion from mucous membranes marks its ultimate secondary effects.

What clinical deductions are to be made from these pathogenetic and pathological effects? I answer, that Hydrastis is one of the most important remedies we possess for the treatment of *mucous fluxes*, ordinarily known as *catarrh.*

Now you must know that this disorder is not confined to any one portion of the body. It may exist wherever mucous membrane exists. The range of catarrhal diseases is very wide, and very many diseases which go commonly by other names might all be included under the single name of *catarrh.* The only form of catarrh to which Hydrastis is *not* suitable is to the *acute inflammatory.* So long as the fever lasts it should not be used. Gelseminum, Sticta, or some other appropriate remedy must be used. But as soon as the inflammatory symptoms subside, its use can be commenced, at first in the middle dilutions (10th to 30th); afterwards, as the catarrh nears its ultimate primary journey, to the 3d or 6th; and finally, for the secondary stage, the 1st, or mother tincture, should be freely used. There is one fact connected with the history of the action of Hydrastis which should not be forgotten, namely, it is not a *volatile* medicine, like Copaiva, Cubebs, Kali iod., and the balsams. It is not thrown off as readily through the glands and mucous surfaces. It therefore requires that it should be oftener used *topically*, as well as internally. In all catarrhal fluxes its local application should attend its internal administration.

I hardly need enumerate the catarrhal or mucous diseases in which the Hydrastis is useful, but it may be well to do so in order to fix them in your memory, namely:

Otorrhœa (even with obstruction of the inner ear and Eustachian

tubes); *chronic conjunctivitis* (even with purulent discharge); *old nasal catarrhs*, of both the anterior and posterior passages; *ozæna*, with bloody, purulent discharge from ulcerated surfaces (if the bones are affected, use Aurum or Mercurius); catarrhal affections of the *respiratory passages; catarrh of the stomach* (one of the commonest causes of dyspepsia); *catarrh of the gall-duct* (a common cause of jaundice); *intestinal catarrhs* (which often go under the names of chronic mucous diarrhœa and chronic dysentery); *catarrh of the bladder;* of the *urethra* (among which are chronic gonorrhœa and gleet); *leucorrhœa*, even with erosions and ulcerations; *uterine catarrh*, etc.

The selection of the dose for internal administration has been mentioned. Its topical application will have to be varied with the severity of the case and the portion affected. The most useful preparations of Hydrastis for this purpose are (1) the tincture, (2) the Muriate of hydrastia, (3) an infusion of the pulverized root in water. The strength of the lotion may vary from a few drops or a drachm of the tincture to several ounces of water; from a few grains of the 3d tritutation of Hydrastis, or a few grains of the crude to a pint of water; or from ten grains to a drachm of the root in a quart of hot water.

It may be applied by means of a syringe, a douche, or an atomizer; or it may be used as a gargle; or (as in gastric catarrh) in doses of several ounces of an attenuated infusion.

A drug which causes a disordered condition of the mucous surfaces will, in nearly every instance, prove to be a good remedy for affections of the skin. The cutaneous analogue of a catarrh and its consequences is a moist, exuding eruption, with or without ulceration. Does Hydrastis affect the skin?

Rafinesque says, "The Indians use the powdered root for blistering of the skin, as an escharotic, and as a topical application to old sores, ulcers, and cancers."

I have never seen severe irritation of the skin follow its local application, although it sometimes causes redness with pustulation, when a lotion has been applied several days or a week. One prover observed "an erysipelas rash on the face, neck, hand, and fingers, with great heat and irritation, which continued for six days, when the skin exfoliated." Another asserts that it caused an eruption like varioloid on the face.

Since the appearance of the fourth edition, Dr. John Wilde communicated the following experience to the "Monthly Homœopathic Review," in a paper entitled The Skin Pathogenesy of Hydrastis:

On two occasions I have seen some severe skin symptoms produced by Hydrastis, and as they were each time very different in character, I think they are worth recording.

The first case was that of a young lady, a clergyman's daughter, about twenty-six years of age, who suffered from enormous hypertrophy of one breast, for which she went up to London to consult one of our most eminent homœopaths. The breast was so large that, when sitting down, it rested on the knees, the weight of it being very wearisome, though the tumor was painless. The physician referred to prescribed Hydrastis in mother tincture, five drops four times a day. She had taken this for about a fortnight or three weeks, when she was alarmed one day to find an eruption upon her arms and body of a number of small furuncular-looking pustules, which the family were afraid were symptoms of small-pox. I lived at a distance of seven miles and had never attended the family, but as they considered her at the time under homœopathic treatment, they sent for me. On arriving I learned the history just related, and, on examination, I found a number of small boils, at a distance of about two or three inches apart, on the hands, and arms, and shoulders. Some were in a papular stage, with an inflamed area, while others were just ready to discharge pus. I gave it as my opinion that the Hydrastis was the cause of the eruption, and ordered its discontinuance, and prescribed medicine for its removal. In four or five days the boils completely disappeared.

The second case arose out of an endeavor to utilize the pathogenesy of the first above described.

My housemaid complained to me that she was suffering much from boils, which came out in crops one after another. They were rather small ones, of the description popularly called "blind boils." I gave her Belladonna and Hepar for a few days, but as fresh boils continued to appear, I gave her Hydrastis, mother tincture, two drops every three hours. The next day the boils were better, but she was covered with nettlerash from head to foot. The following day the face became affected, and through scratching it had become much swollen, and the eyelids were much puffed. She described the irritation as itching, burning, and stinging; it affected all parts and was worse at night. Of course I ordered the Hydrastis to be discontinued, when both boils and nettlerash disappeared. Within a week a large and painful stye appeared on the left eyelid, which ran the usual course. This was doubtless due to the Hydrastis, as the girl stated that she had never had a stye in her life before.

I ought to have stated that the rash resembled scarlatina both in color and in *disappearing for a long time under pressure;* indeed, so much was it like, that had it not been for the itching and my knowledge of the symptoms produced by Hydrastis, I should have suspected she had got that disease.

Remarks.—Among the recorded symptoms of Hydrastis in Allen's "Encyclopedia" we find "erysipelatoid rash covering face, neck, palms of hands, and joints of fingers and wrists. Irritation maddening, with intense burning heat . . . .

always worse at night." Again, "pimples made their appearance around the mouth and chin, resembling the early stage of small-pox."

Thus the cases I have related confirm the previous provings of the drug, and this is very useful, and worthy of note, but in my first case the eruption was more distinctly furuncular than in the provings of Allen's "Materia Medica," in which the eruption is described as resembling small-pox. On this account any additional description which will help to define the true skin symptoms is worth recording.

It will be seen from the second case that Hydrastis is a remedy for boils, for they were cured within a few days, and no more appeared after the medicine was commenced. I have no doubt that it will prove an equally good remedy in acute urticaria, and I intend giving it a trial.

It is probably homœopathic to some acute exanthemata; also to some forms of chronic skin diseases. When chronic eruptions depend on debility for their continuance, as is sometimes the case, then the Hydrastis, by its invigorating influence, may prove curative.

It has been found useful in *lupus*, *rhagades*, and *excoriations*. It may be employed as a simple lotion, or a glycerole, or in the form of a cerate; if the patient is cachectic and exhibits symptoms indicating this remedy, its internal use will be of advantage.

Dr. McLimont, of England, claims to have treated three cases of *lupus* successfully with the internal and topical use of Hydrastis.

Dr. H. M. Saxton writes me that he has had considerable experience in the use of Hydrastis as an external application, and gives the following cases illustrating its use:

CASE I.—A girl seven or eight years of age fell and lacerated the scalp above the left temple. The wound was several inches in length, in the form of a crescent. It suppurated and became a troublesome sore. After cleansing the surface, the Hydrastis, in fine powder, was applied. It checked the suppuration, allayed the inflammation, and under its use the ulcer healed in a few days.

CASE II.—Was an ulcer from a burn, on the back of a child's hand. It was much inflamed; very painful; she could hardly move her wrist. The powdered Hydrastis was applied lightly. Although the child irritated it a great deal, it soon healed and left the cuticle smooth and without a cicatrix.

CASE III.—*Infantile Intertrigo.* "Excoriations in the folds of the neck." The dry powder was applied, and it healed in three days.

I would advise you to dilute the crude powder with starch or some similar substance.

As a wash, I have found one part of the tincture to ten of water more useful in obstinate excoriations of the skin in children than

Arnica. Glycerin is a better vehicle than water. The Glycerole of Hydrastis is used with great advantage in cases of intertrigo, sore nipples, and ulcerated surfaces. While Arnica seems specific for contusions, with extravasation, and Calendula for incised and lacerated wounds, even when unhealthy suppuration ensues, the Hydrastis seems the best remedy for chronic ulcers arising from either of the above causes, or from burns, scalds, or some disease of the skin.

The Hydrastis canadensis has been used in England in the treatment of *variola*. In a somewhat remarkable pamphlet issued in that country, written by Dr. J. G. Wilkinson, of London, and entitled "The Cause, Arrest, and Isolation of Small-Pox, by a New Method," the supposed virtues of this remedy are thus vauntingly set forth:

> Hydrastis is the remedy which embraces something like a specific treatment of small-pox. Where the itching and tingling of the face at the time of maturation were so distressing that I ordered the face to be dabbed with a cold infusion of the Hydrastis, a small portion being warmed for each application, the relief experienced was instantaneous as well as complete and lasting. The swelling of the face also subsided quickly, and the case proceeded with more than ordinary rapidity to a happy issue. No second case occurred in the house, a point of importance which I request the reader to bear in mind.

But there is another point of importance which Dr. Wilkinson forgot to mention, namely, whether the patient, and other inmates of the house, had *ever been vaccinated*. It is a fact well known to all practical physicians, that small-pox occurring in persons who have been vaccinated, will frequently appear to pursue a severe and even aggravated type, up to the very point of maturation, and then suddenly subside as if cut short by some therapeutic power. It is this peculiar phase of disease that has led to so many unfounded laudations of new remedies, such as Sarracena, etc.

The Hydrastis has since been used in this country in small-pox, after the manner of Dr. Wilkinson. The testimony of several physicians as to its good effect was published in the second edition of "New Remedies."

I do not consider Hydrastis indicated in dry, furfuraceous eruptions, in which Arsenic and Phytolacca are useful. The skin may be dry and smooth, but not scaly. The eruptions must be moist. The *ulcers* may discharge profusely, or may be full of unhealthy granulations, or dry and shining.

This is a good place to mention the use of Hydrastis in *cancer*. It originated in England with two physicians claiming to be homœopathists. They evidently received the hint from Rafinesque, who mentioned its use by the American Indians in cancer. Those physicians claimed for Hydrastis the power of destroying the cancer disease, or dyscrasia in the blood, for they wrote:

> This—the Hydrastis—is the medicine upon which we chiefly rely in our treatment of cancer, usually putting our patient under a course of it for a month or so before commencing the enucleation of the mass. Our doses vary from one to two drops of the 6th dilution, to drop doses of the mother tincture; the lower forms being used in those cases in which the cachectic condition is fully marked; and we must confess that we know of no medicine which has caused so great an improvement in the general health of our patients as has this. We continue the medicine during the whole of the treatment, and for some weeks after.

Those physicians did not, however, rely entirely upon the use of the Hydrastis alone, but consider it necessary to "enucleate" the tumor. Hydrastis was applied to the tumor after it had been incised. But it will seem strange to Ameriean homœopathists, who have always looked upon their English brethren with something akin to reverence, when they learn the manner of its application. "A piece of lint is applied to the surface, spread with equal parts of a paste composed of a strong decoction of Hydrastis root, *Chloride of zinc and flour, and Stramonium ointment.*"

The testimony of Dr. Hastings, of England, relative to the efficacy of Hydrastis in cancers, is not so favorable. He says:

> Having for some considerable time used Hydrastis in cancer cases, I think I may without any presumption make some remarks thereon. I have now for upwards of eighteen months prescribed it in about twenty cases of cancers, viz., cancers of the tongue, breast, lip, hand, etc., in a variety of forms, from high to low dilutions; applied it externally, as Dr. Pattison does, and even by his directions, having twice sent patients for his advice, and I regret to say in no single instance has it effected a cure, nor even appeared to check the disease. . . . . In one or two cases it did seem at first to have some power of arresting the disease, but this was of short duration. . . . . It is no doubt a powerful medicine, but whether it will cure cancer in any of its stages, is very questionable, at least according to my experience of it.

This was written in 1860, and if Dr. Hastings had found it useful, he would most probably have informed the profession.

In my criticism on this method, I denounced the mixing of Hydrastis with caustics. Fortunately their method was never

adopted by any respectable homœopathist in this country, although many used the Hydrastis *alone* as an application to supposed cancerous tumors. In a few cases good results were claimed, but a large majority were only palliated. I do not think it has any more specific curative power over the cancerous dyscrasia than the Carbolic acid, recommended of late by a noted cancer doctor in this country.

I do not believe the Hydrastis has any specific power on *enlarged glands*, certainly not in any manner similar to the iodides. It is well known that any restorative remedy, even fresh air and a good diet, will cause the disappearance of glandular swellings. The Hydrastis may have this effect, but only by its invigorating power.

Hydrastis has always been a favorite domestic remedy in "sore mouth." Many physicians use it in all forms of *stomatitis* of children; in simple ulceration of the buccal mucous membrane; in mercurial sore mouth, and in *stomatitis materna*. I have witnessed the most obstinate varieties of these affections yield to the local application of Hydrastis in decoction or powder, after the mineral acids, astringents, nitrate of silver, of the old school, and even homœopathic remedies had been tried in vain. The best method of application is to add one drachm of the tincture to half a pint of water; use this as a wash every three or four hours.

The best preparation for use in diseases of the mouth and fauces is the Muriate of hydrastia—one grain to an ounce of water—applied every three or four hours. It is much more successful than the tincture. With it I have cured many cases of stomatitis, which had resisted other measures. In my own case it acted promptly in removing a disagreeable dryness of the tongue, with a sensation as if it had been burnt; it felt sore and raw, and had a dark-red appearance, with raised papillæ. The gums were also dark red and swollen, as was also the mucous membrane of the mouth. The uvula was relaxed and sore; large quantities of yellow tenacious mucus was hawked from the throat, leaving a sensation of rawness. A wash of Hydrastia mur. cured the whole in two days, although it had lasted for two weeks, uninfluenced by Nitric acid, Mercurius, and Tincture of hydrastis.

It is a favorite remedy with many homœopathic physicians in the West as a gargle in cases of simple ulcerated sore throat; also

in *angina* with ulceration, when accompanying scarlatina; it does not, like Baptisia, remove the fetor in a direct manner, but its curative effect over the ulceration tends to remove any putrefactive condition. The pathogenetic symptoms are quite similar to those for which Dr. Gray, of New York, so highly recommends Mercurius iodatus; and the pathological condition, namely, inflammation and engorgement, with profuse secretion of mucus from the mucous follicles of the throat, very much resembles the condition which Mercurius causes. In some varieties of *chronic angina*, we find the mucous membrane of the fauces studded with round, protuberant spots, of a red color, as if injected with blood, and the patient complains of an aggravation from the least exposure to cold. For this state of the throat Hepar sulphur is generally prescribed, but its permanent curative effect is very much aided by the internal and local use of Hydrastis.

Dr. Lodge had excellent success with Hydrastis in a case of *mercurial salivation*. A man troubled with the itch was told that an ointment of Corrosive sublimate would cure it. He used it freely. As the skin eruption disappeared, severe mercurial salivation was developed. When called to see him his jaws were set, liquids were swallowed with difficulty, power of articulation was lost, and he could only make his wants known by writing on a slate. The ulceration of the mouth, which followed the salivation, was soon relieved by Hydrastis ($\frac{1}{10}$), one part tincture to nine parts water, and the patient was able to speak in about a week. The recovery was rapid and permanent.

Syphilitic angina has been benefited by the use of this medicine; indeed, in its action on the glands of the mucous membrane, Hydrastis is an analogue of the mercurials. There is a kind of sore throat which often attends dyspepsia; it is sometimes known as "bilious sore throat," although the name is inappropriate; it is a sympathetic disorder, arising from irritation of the stomach and lower portions of the œsophagus; for this troublesome affection, the Hydrastis internally is an excellent remedy.

This leads us to a consideration of its value in gastric disorders. In my first edition of "New Remedies," I wrote as follows: "This remedy seems likely to prove as prominent a remedy for those conditions which are known under the name of dyspepsia, as Nux vomica, Sulphur, or Pulsatilla."

This prediction has been verified by hundreds of physicians during the intervening ten years. I quoted the opinions of eclectic physicians, and they will bear repeating again. Dr. King says:

It is successfully administered in dyspepsia and chronic affections of the mucous coats of the stomach; in chronic inflammation of the stomach it is very valuable; it will be found of special advantage in the treatment of persons who are intemperate, gradually removing the abnormal condition of the stomach, and in many instances destroying the appetite for liquor.

Dr. Scudder writes:

In anorexia, indigestion, and general debility, arising from a languid, or atonic state of the stomach, it is unsurpassed, restoring tone to the stomach, promoting the appetite, and acting as a general restorative. It may also be employed in those cases of chronic gastritis and chronic irritation of the stomach with altered secretion, which constitute the worst and most persistent forms of dyspepsia. In acid indigestion the Hydrastis, associated with calcined magnesia or prepared charcoal, will be found truly valuable, especially when attended with a torpid condition of the bowels. In those sympathetic diseases of the digestive organs, arising from uterine disease, we have obtained more benefit from this than from any other agent. The cases in which we have known this plant used with most success, were atonic dyspepsia, attended with torpidity of the liver, languid circulation, and constipated bowels.

The few pathological symptoms which we have obtained point to its use in dyspepsia with acidity, and dyspepsia from atony. The *faint feeling* with palpitation is quite suggestive of congestion of the portal system; but we should be guided, perhaps, more by the general action of Hydrastis upon mucous membranes. We know that it causes (1) *blennorrhagia;* (2) excoriation and ulceration (*superficial?*); and a condition simulating chronic inflammation. I have used this medicine in gastric disorders for several years, and my experience, together with a knowledge of its general effects, led me to consider it homœopathic to the following conditions; I use the nomenclature of Dr. Chambers—(see Disorders of Digestion):

(1) Mucous flux (chronic).
(2) Excess of epithelium (chronic).
(3) The anæmic state.
(4) Chronic inflammation (mucous).
(5) Ulcer of the stomach.

(6) Deficiency of gastric juice.

I also predicted in my second edition of "New Remedies," that the Hydrastis might "prove of value in cancer or scirrhus of the stomach, if the experience of our English colleagues should be verified." It certainly is an excellent remedy in cases which appear to be due to ulceration of the stomach.

In the appendix to the second edition of "New Remedies," a case is related by Dr. La Brunne, of *epigastric tumor with marasmus*, presenting the following symptoms:

Patient an old man of 70; had pains in the stomach five or six years, then loss of strength, great sensitiveness of the epigastric region, in which pulsations isochronous with the pulse were perceived, and a flattened, resistant tumor of some two inches in diameter. In a few months the pains became insufferable, loss of appetite and sleep became more alarming, frequent vomiting and great anguish about the heart, almost permanent. The tumor was pronounced scirrhus. He had taken Nux, Ignatia, Chamomilla, Colocynth, Arsenic, and many other medicines with no benefit. He now took Hydrastis, mother tincture, two drops morning and evening in a spoonful of water. After six weeks the whole body felt improved and strength commenced to return, and in a few months was perfectly comfortable as regards pain, sleep, and digestion. The tumor had decreased two-thirds, the cœliac pulsations decreased three-fourths in intensity, and he now enjoys very good health. The report of this case was translated from the "Journal Dispensaire," Hahnemann, vol. iv, No. 11.

The intestinal symptoms, observed by the provers, are not notable in any respect. It caused light-colored, yellow-greenish stools, with griping and faintness; the evacuations, like those of Podophyllin, were inclined to be persistent. I do not think it capable of causing watery stools, or any such severe symptoms as Podophyllum, Mercurius, or Iris. It rather resembles Rheum, Senna, Chelidonium, and Aloes. If provings were carried far enough we should doubtless get the stools mixed with or coated over with the peculiar tough mucus, constituting a *mucous flux* of the intestines, similar in character to that which it causes elsewhere. These are its primary effects.

The secondary effects of Hydrastis can readily be imagined, namely: An obstinate constipation from one of two conditions,—(1) a chronic, torpid mucous secretion from the intestinal canal, which retards its peristaltic action, and the natural advance of the

fæces; (2) an unnatural dryness of the mucous surface, with hard, dry, knotty stools.

We feel safe in asserting that Hydrastis will not be found useful in *diarrhœas* of a severe character. An irritation of the mucous coats is its initial primary effect; this causes expulsion of fæces of a "light-yellow color, and of a soft, mushy consistence." After this come the mucous stools, with burning pain and faintness. In such conditions it should be used highly potentized. It is also indicated in the ordinary non-inflammatory *mucous flux of the bowels*, in which the lowest dilutions may be used, or the 6th trit. of Hydrastin, which corresponds to about the 1ˣ dil. of the tincture.

Hydrastis is indicated in some forms of dysentery; in mucous enteritis, when of a catarrhal character, and the inflammation subacute, the Hydrastis at the third dilution will prove curative. In chronic enteritis, when the discharges are tenacious, slimy, and accompanied with tenesmus, or when the fæces are in the form of hard balls, coated over with yellowish, tough mucus, this medicine will be of service in the first and second potency. The topical application of the remedy must not be forgotten in these cases. Enemas of Hydrastis will be found useful, and will bring about a cure unaided, or at any rate materially aid its internal action; when the disease is located in the rectum, this form of application will be found particularly beneficial.

It is certainly indicated in *blennorrhœa* of the intestines, as much so as the Muriate of ammonia.

In *ulceration of the rectum*, occurring after bad cases of dysentery, the local application of Hydrastis will effect prompt cures; also in *fissure* of the anus. The cerate will be the best preparation in these cases.

In *hœmorrhoids* this plant has some reputation. Reliable practitioners have assured me that they have cured the most obstinate cases by the alternate use of Hydrastis and Podophyllum, using enemas of Hydrastis every night.

In *excoriation of the anus*, as it occurs in little children, or even adults, in diarrhœa and dysentery, no better remedy can be advised; it should be used in the form of a glycerole.

I ought to give you some information as to the manner in which the Hydrastis cures *jaundice*.

It causes jaundice evidently by inducing a catarrhal condition

of the hepatic ducts. I am not sure that it can irritate the *secretory* function of the liver, although the persistent *yellow stool* would imply that it has such an influence. But this may be coincident with the catarrhal irritation. It may cause, coincidently, by its primary action, an increase of the secretory power of the liver, and an undue secretion of mucus from the hepatic ducts. This increase of mucus may go on to such an extent as to prevent the flow of bile from the liver into the gall-bladder, and from the gall-bladder into the intestines. Then it may induce jaundice from *suppression* and from *retention*, the former by its secondary action, the latter by its ultimate primary effect.

Clinical experience in our school shows that it is capable of curing very bad cases of jaundice. Dr. Albertson, of San Francisco, reported many cases, twenty in all, for the second edition of my "New Remedies," in which "the skin and eyes were of a dark, greenish yellow; urine very dark, fæces light-colored, and great debility," cured with this remedy in drop doses of the mother tincture, in some cases; in others the first and second dilutions.

It seems to be a favorite remedy with English physicians for *constipation*. Dr. Hastings reported many cases cured by its use in drop doses of the mother tincture.

Dr. R. Hughes, of England, says of the Hydrastis canadensis: "My chief experience with this drug has been in the treatment of constipation; for which it is a precious remedy, far superior to the Nux vomica usually prescribed. It is in cases where constipation stands alone, or is itself the cause of the other existing ailments, that I find the Hydrastis so valuable. I have used it in the potencies, from the first to the sixth decimal. The second has seemed to me to act most satisfactory."

Dr. Massy, in his notes on "New American Remedies," mentions it very favorably.

In this country the testimony of many of our most prominent physicians is favorable to its curative power.

In all the cases reported, as well as in the cases wherein I have found it successful, the constipation was of long standing; had been aggravated by cathartic medicines; the patients were weak and enfeebled; the complexion sallow; the tongue foul; pain in lower bowels and rectum; indigestion; stools hard and nodulated.

The best results have been obtained from the tincture, 1st and 2d dilutions, repeated two or three times a day. The following case, in the second edition of "New Remedies," gives a good picture of the cases which Hydrastis cures:

Mrs. H., age 26; light hair, pale complexion, and of feeble constitution; has from childhood drank tea; for ten or twelve years had attacks of headache with constipation. Three weeks after the birth of her first and only child, she was attacked while at stool with pains and soreness of the rectum and anus; burning, smarting pains, very severe, continuing often six or eight hours after each stool, with a hot sensation in the bowels, also colic and faintness. She has only one or two stools a week, very hard, and of a natural color. She has no falling of the rectum or but little pain in that region, except at the time her bowels move, and for several hours following.

Her symptoms remained unchanged for two months under the use of Ignatia, Nux vomica, Pulsatilla, Sulphur, Nitric acid, warm water injections, and warm hip-baths.

On turning my attention to the new remedies for assistance in this case, I selected Hydrastis canadensis as being the most appropriate. I gave the tincture, having no other form of the remedy at hand. Three drops in half a glass of cold soft water, one tablespoonful taken every six hours.

In two weeks the pains in the rectum were wholly removed and the bowels regulated. Her colic, faintness, and heat in the abdomen also soon disappeared, leaving her well. It is now one year and six months since she took the Hydrastis; as yet no return of her former symptoms.

No mention has been made of the *diuretic* action of Hydrastis, yet it would seem to have such effect; it needs confirmation, however, and further provings may clear up the matter. From analogy it is more than probable that this medicine has the same effect upon the mucous membrane of the urinary organs that it has upon the mouth, nose, and fauces above alluded to. The resinoid principle of the drug may be eliminated through the kidneys, the same as Turpentine, Copaiva, and others; if so, it would undoubtedly cause those blennorrhagic conditions of the bladder, urethra, etc., for which it has been considered almost a specific.

King, and every other eclectic writer on therapeutics, asserts its "great value in gleet, chronic gonorrhœa, *incipient stricture, spermatorrhœa*, and *inflammation and ulceration of the whole internal coat of the bladder*." "Many cases of ulceration of the internal coat of the bladder have been cured by the decoction of Hydrastis alone. It must be injected into the bladder and held there as long as they can conveniently retain it—to be repeated three or four times a day, immediately after emptying the bladder." It may

be prepared as follows: Tincture hydrastis can., one drachm; hot water, one pint; injected about blood heat. Its internal use alone would undoubtedly cure the disease, but it would require a longer time. I have cured cystic blennorrhœa with Copaiva, Chimaphila, and Uva ursi internally.

In *chronic gonorrhœa* or urethral blennorrhœa the Hydrastis is popular with some practitioners of our school. They use it after all the inflammatory symptoms have subsided, and a thick yellow or green tenacious discharge persists. It is prescribed internally (low dilution), and the dilute tincture or watery extract injected.

I have rarely met with cases which appeared to indicate it, and therefore have not used it in this disease. A cachectic condition, with indigestion and constipation, would be a good general indication in such cases. It would be as fully, if not better indicated in obstinate *gleet*.

In *balanorrhœa* it is an excellent remedy. It need only be used as a wash, and the diseased surface will soon be restored to its normal condition.

In conjunction with Phosphoric acid, it is one of our best remedies for the debility and general derangement resulting from *spermatorrhœa*. If there is spinal exhaustion, it should alternate with Nux vomica or Strychnia.

No provings of Hydrastis have been made by women.

The knowledge that we possess relative to the value of this remedy in diseases of the organs of generation of that sex has been obtained *ex uso in morbis*. Reasoning from analogy, we should naturally arrive at the opinion that it would be useful in many diseases of the uterus and vagina in which a blennorrhœa is the predominant symptom. Clinical experience has verified this opinion.

I have found it one of our most efficient remedies against *uterine catarrh*—known by its synonyms of *chronic mucous metritis* and *chronic mucous cervicitis*. The former is a disorder affecting the mucous lining of the uterine cavity, which may be eroded, and discharge constantly a purulent secretion, mixed with tough, stringy mucus. The latter affects only the glandular portion of the cervix uteri, and the discharge is tenacious mucus, transparent or yellow, and often hangs in long ropes from the os uteri.

In such conditions I give the Hydrastis internally, in the low

dilutions, and use a lotion of the watery infusion directly to the diseased surface.

When the os is open enough to allow its ready escape, or when it can be made so by the introduction of sponge tents, I inject an ounce of Hydrastis water into the cavity every day. If this is not feasible, a swab of cotton, on a silver probe or sound, or medicated gelatin bougie, can be medicated with Hydrastis muriate, and the cavity of the uterus or cervical canal wiped out every day.

In the majority of cases this gentle treatment suffices. In obstinate cases, or when extensive granulation has taken place, the Hydrastis applications may be followed by dilute Kali bichromicum or Chromic acid; and Kali bich., Cubebs, and Phytolacca to be used internally at the same time.

In *epithelial abrasion* of the *os*, *cervix*, and *vagina*, it is one of our best applications. In these cases I prefer to apply it on a *tampon*, *i. e.*, a ball of clean white cotton, to which a cord is attached, saturated with Glycerole of hydrastis, and placed against the os through a speculum.

(*Aqua hydrastis* is best made by infusing ℥j of Pulv. rad. hydrastis, in a pint or quart of water, to which add half an ounce or an ounce of Glycerin. *Glycerole of hydrastis* may be made by increasing the strength of the above about nine-tenths, or using ℥j of Tinc. hydrastis with ℥j of Glycerin and water each.)

Vaginal leucorrhœa is often successfully treated by means of enemas of Hydrastis water, even when much irritation is present.

In *cancer* of the uterus and vagina, it has no curative value, but appears to modify the secretions and allay the pain a little, but it does not compare in efficacy with Carbolic acid or Chloride of zinc.

You must bear in mind that the general condition of the patient will often give you the strongest indication for the use of Hydrastis, namely, the cachectic state, the weak muscular power, the poor digestion, and obstinate constipation.

In that obstinate affection, vaginal leucorrhœa (catarrh) of infancy and childhood, you may have to prescribe injections of Aqua hydrastis, while you are giving internally Calc. carb. and Sepia.

Although our eclectic colleagues recommend it in "all *chronic*, and even acute inflammations of mucous membranes," yet they make no mention of its use in catarrh of the air-passages. The pathogenetic symptoms point directly to its effects on the respira-

tory tract. It causes many notable catarrhal symptoms. I would recommend it, theoretically, in acute catarrhs—nasal, laryngeal, and bronchial (in the 6th dilution), also in chronic catarrhs of those passages. It is homœopathic when the discharge is thick, yellowish, very tenacious, "stringy," and profuse. In these cases the low attenuations should be used, aided, when practicable, by the topical application in the form of injection. In the bronchial catarrh of old people, with debility, loss of appetite, cachectic conditions, it should prove very useful.

Dr. Small reports the case of a child affected with a chronic catarrhal cough, accompanied with febrile paroxysms in the evening and night, with debility. The cough was rough, harsh, and rattling, and continued day and night. After using many medicines with but little benefit, he gave Hydrastis 2d, and the cough and fever both disappeared in a few days. Under its continuance the child gained appetite and strength.

Since the introduction of the steam atomizer and various spray-inhalers, my favorite method of obtaining the curative action of this medicine in the bronchial catarrhs, is to throw the spray down the throat, when it is inhaled and moistens the whole bronchial mucous surface. The Aqua hydrastis of the strength above recommended cannot injure the most delicate mucous surfaces. I have often thrown the spray into the eyes in cases of chronic conjunctivitis, and the patients invariably felt only grateful relief.

I have alluded to the use of Hydrastis, and its active principle, Hydrastin, by the eclectics in the treatment of *intermittent fever*. Those of that school who claim the most thorough knowledge of its curative action, assert that the yellow alkaloid, or *Hydrastina*, is the one which possesses antiperiodic powers. This Hydrastina is the same as *Berberina*, obtained from the Berberis (Bayberry). I learn that Dr. Pulte, of Cincinnati, one of the best known physicians of our school, recommends the use of Berberina in ague and fever, and other periodic affections, on the ground that it causes no stimulation or congestion of the head as does Quinine. At one time during my early practice in the most malarious portion of Michigan I tried the Hydrastin in many cases, but in none did it answer my expectations, and while eclectic physicians in my vicinity claimed to cure ague with it, I found that they generally combined it with Quinine, Salicin, or Prussiate of iron.

The provings so far have not developed any characteristic febrile symptoms, nor do I believe it is a fever remedy in any sense. If it arrests ague it does so, probably, by its general restorative action, in a manner similar to many other bitter medicines.

The Sulphate of hydrastina is the best preparation when we wish to get the pure tonic power of the drug. It should be prepared in triturations. It is soluble in water, but not in alcohol.

Dr. Clifton, of Northampton, England, writes as follows of Hydrastis in *dyspepsia*. He gives the following indications:

1. The Facial Expression.

This is dull, heavy, of a yellowish-white color, sodden-looking, not unlike that in which Mercurius is indicated, but whiter and having less animation. Though there is in its provings no reference to the expression or complexion, as affording reasons for selecting Hydrastis, I have frequently found that when the gastric symptoms calling for this medicine have been present the character of the face has been that I have described.

2. Tongue.

The tongue is large, flabby, and slimy-looking. Underneath the fur the tongue is of a bluish-white color, having in its edges the imprints of teeth. So far it is like the Mercurius tongue, but lacks the tremulous character of this organ, so often seen in cases benefited by Mercurius. The coating is a yellow, slimy, sticky fur.

There are morbid states occurring in other organs to which Hydrastis is homœopathic, but where the appearances of the face and tongue I have described are not present. In the dyspepsia it relieves. Both are met with.

3. Eructations.

These are generally sour or putrid, and more commonly the former than the latter.

4. Appetite.

The appetite is generally bad; the power of digesting bread and vegetables being especially weak. Both are followed by eructations.

5. Stomach.

There is in the stomach a sensation of weight (not as after Nux and Bryonia, "weight like a stone"), and with the weight and fulness, an empty, aching, "gone" feeling, more or less constant, but aggravated by taking a meal. The aching "gone" feeling is something like that produced by Gelseminum, but is attended with more general fulness of the stomach, and more *sour* eructations. Further, although the Gelseminum tongue is sometimes coated white or yellow, it is not so large and flabby as is the Hydrastis tongue. This symptom is, I am aware, produced by many other medicines besides Gelseminum, especially by Ignatia and Cimicifuga, but Ignatia and other medicines do not give rise to the other symptoms peculiar to Hydrastis. In tea-drinkers this symptom occurs fre-

quently, but with them the tongue is generally white (except when colored by the tea), and in their dyspepsia China is often found to answer better than other medicines, especially in removing the flatulence with which they are commonly troubled.

6. Action of the Bowels.

This may be either infrequent and constipated, or frequent, with the stools loose, soft, light-colored, and with flatus. But as a rule the bowels are constipated, and stools lumpy and covered with slimy mucus in cases indicating Hydrastis.

7. The Phthisical Constitution.

I say phthisical constitution, because there is a dyspepsia which often occurs in persons in whom phthisis is fully developed. They are patients, members of whose families have died of phthisis, but who, without having tubercles in the lungs, suffer every three or four weeks or longer from what they call bilious attacks and indigestion. Such persons generally have dyspepsia marked by the symptoms I have named. Here Hydrastis, in one or two drop doses of the mother tincture two or three times a day, works marvellous changes for the better. Then, again, in persons with developed phthisis pulmonalis, with cough, purulent expectoration, emaciation, furred tongue, loss of appetite, "goneness" at stomach, flatulence in the bowels, faint feeling after stool, stools generally loose and frequent—in such cases Hydrastis in alternation with Arsenicum will often prove very beneficial. Iodide of arsenic is also useful, but where it is so the tongue is generally less furred, and there is less flatulence. The late Dr. Marston called attention to the value of Calcarea carbonica in the dyspepsia of phthisical patients who had "fulness of the stomach, acidity, dislike to meat and hot food, with pain and pressure in the stomach, vomiting and headache." I can quite indorse his observations, but in such cases nightsweats and other symptoms of Calcarea are generally present, which we do not find to have been caused by Hydrastis.

I have not alluded to one symptom, printed in italics in Hale's article on Hydrastis, viz., "great sense of sinking and prostration at the epigastrium, with violent and long-continued palpitation of the heart." I have never noticed this symptom to have occurred in patients for whom I have prescribed Hydrastis, even in doses of five drops of the mother tincture, neither do I remember ever having given it for that symptom.

In Hydrastis dyspepsia I have generally found the lower dilutions, such as the 1st decimal, answer best; but in catarrh of the head, nose, and fauces, indicating this remedy, I generally give the 6th centesimal, as in nearly all the provings of this medicine by dilutions, up to 30, catarrh of these parts was most marked.

HYDROBROMIC ACID.

In this acid resides the hypnotic and nervine properties of the bromides. Each drop of the pure concentrated acid should represent the medicinal power of one grain of any of the Bromide salts. The acid possesses properties which the bromides do not possess, while each bromide possesses, in addition to the medicinal action of the acid, properties which belong to the alkali with which the acid is united.

Twenty to thirty drops of the pure acid may be given in cases of *sleeplessness* from mental or emotional irritation; *cerebral irritation* from overwork and business worry; and even *cerebral congestion.* It has many advantages over the bromides. It rarely disagrees with the stomach; it causes no eruptions, acne, etc.; the taste is pleasant when diluted with water and sweetened, or not, as the patient likes.

Its use can be continued longer without causing pathogenetic symptoms. It can be given in fever and inflammations when the bromides are not well borne. Besides, in common with all acids, it possesses *tonic* properties, increasing the appetite and "cooling the blood."

One indication guides me in the selection of the acid instead of the bromides, namely, a *red tongue, inclined to be dry.* The bromides are better indicated in a white, pale, flabby tongue.

I have found it useful in the nervous fretfulness of children when teething, or from heat, even when feverish, when Aconite or Coffea did not seem efficient. My method of administration is to put 15 or 20 drops of the acid into as many teaspoonfuls of sweetened water, and prescribe a teaspoonful every half hour or hour.

In the hysterical erethism of nervous women who suffer from the effects of social dissipation, this acid acts admirably; a teaspoonful of the $\frac{1}{10}$ dilution (always made with water), repeated every hour or two, exercises a soothing effect which we cannot always get from other remedies.

Its power over reflex action is probably inferior to the salts of Bromine, but in mild cases of *reflex irritation* I should expect good results from it.

This acid was and is still used by some practitioners to modify the effects of Quinine on the brain. Added to a solution of Quinine, in the proportion of 10 drops to each two grains, it prevents the ringing in the ears, the headache, and the cerebral congestion of that drug. It does this by contracting the cerebral bloodvessels and thus prevents the abnormal intracranial blood pressure.

It has also been used successfully for *tinnitis aurium, "surring" and throbbing in the ears, flushed face, heat and heaviness in the head* of plethoric persons. I have used it for these symptoms in women with *scanty menses* with good results. (Dose 5 to 10 drops 3 or 4 times a day.)

I believe it would be superior to the bromides in that form of plethora from *celibacy* with repressed sexual functions.

The above curative powers belong to the secondary action of the acid.

There is another condition of the system, characterized by *hebetude of mind, tendency to sleep, semi-stupor,* with restlessness, *red tongue, great weakness,* etc. I have used this acid in these conditions, and find it equal to phosphoric, but the latter is secondarily homœopathic to that state. The former should be given in the 3d or 6th aqueous dilution, repeated every few hours.

HYDROPHYLLUM VIRGINIANUM.

The meagre knowledge which we possess of the medicinal uses of this plant, was given to the profession by Dr. P. B. Hoyt, of Indianapolis, in a paper read by him before the Indiana State Society. He says:

My attention was first called to this plant in 1860, near Nashville, Tenn. While strolling on the banks of the Cumberland River, I discovered on a bluff near by a cluster of beautiful blue flowers, which I gathered.

Not more than ten or fifteen minutes after, my eyes began to water and burn, with slight itching. This continued to increase till when I arrived at my boarding-house I was suffering quite severely. I found that my eyelids were swollen and the sclerotica much injected, presenting a fiery redness, and there was some sensitiveness to light. These symptoms continued through the afternoon and evening, and kept me awake for some time. In the morning my eyelids were agglutinated, and on opening my eyes they were quite sensitive to the light. The burning and smarting was less, still, my eyes discharged water, more or less, for two or three days. The symptoms gradually subsided and in a week I was well again.

Dr. Hoyt states that twice afterwards he had the same eye-symptoms after gathering the plant. He says he tested it in one case of *catarrhal inflammation of the eyes,* which it cured "like magic."

I cannot find any mention of this plant except in Rafinesque's "Medical Botany," and he quotes *Schoepf,* as saying that the "Hydrophyllum canadensis is used against the bites of snakes, and the *poisonous erysipelas produced by Rhus.*" It would seem by this that it has cured eruptions similar to that which it causes.

Gray says there are four species of Hydrophyllum (Waterleaf), all growing in the United States.

I should judge they resembled in their effects Euphrasia, Pulsatilla, and Rhus, but this is only conjecture.

THE HYPOPHOSPHITES.

The salts of Hypophosphorous acid, or those known as the alkaline hypophosphites, were introduced into the practice of medicine nearly twelve years ago, by Professor Churchill. He was very sanguine that he had discovered in them the specific remedies for *phthisis* and many tubercular diseases. He did not claim that they would cure advanced cases, nor such as were persistently hereditary. His theory was that phthisis and tuberculosis was due to a deficiency of phosphorus in the system; that the hypophosphites were decomposed in the stomach, and the phosphorus was assimilated. He believed that this was the only way that free Phosphorus could be safely taken into the system.

The allopathic school treated these medicines as they do all new medicines—used them in excessive quantities and in all cases. They expected too much from them, and not having any characteristic indications for their use, they failed in nearly all cases, and finally rejected them almost altogether.

It remained for our school to take them up and use them in a scientific manner, selecting each one from special indications based on our provings of Phosphorus and the alkaline bases of which they are composed.

Take for example the Hypophosphite of lime (Calcis hypophosphis). If we wish to select this medicine in a case of pulmonary difficulty, we must note down, as Hahnemann recommended, all the symptoms of the case, and then examine the pathogenesis of Calcarea and Phosphorus, or Phosphoric acid, and if they cover the totality of the symptoms, the Calc. hypo. is the homœopathic remedy. I am well aware that we cannot always predict that the union of an acid with an alkali will result in a medicine which shall comprise the qualities of both. New qualities may arise, as is the case with the bromides; but many years' experience with the Hyphosphites enables me to assert that the action of Calc. hypo. is very similar to the action of Calc. phos. and Phos. ac.

We have no systematic provings, but fortunately Dr. Churchill has left us some valuable observations, which confirm my opinion; *e. g.*, he says of the

HYPOPHOSPHITE OF LIME,

That its pathogenetic (primary) action is to cause "a well-marked increase of nervous force; a remarkable increase of health and strength; calm and profound sleep; plethora, with a tendency to hæmorrhages; hæmorrhoids bleed for the first time, or commence under its use; profuse epistaxis; pulmonary hæmorrhages; profuse and frequent menses; great increase of appetite; fulness of the bloodvessels of the hands and feet;" and he warns against the excessive use of it, for "large doses tend to cause the development of the pulmonary inflammation unhappily so frequent and fatal among consumptives."

We have seen pictured very vividly the chief pathological effects of the primary overstimulation of Calcarea and Phosphorus. If given to prevent the development of phthisis, it may cause the very conditions you wish to avoid, if you use too large doses. For symptoms leading to plethora, hæmorrhage, or pulmonary inflammation, you should not use lower than the sixth trituration. I prefer this medicine in many of that class of cases where I used to give Calcarea and Phosphoric acid.

My experience with Calcis hypo. enables me to speak with considerable certainty, for I have found it useful in *incipient phthisis*, with hacking cough, hectic fever, nightsweats, scanty and delaying menses, great nervous prostration, great tenderness of the outer thorax and rawness in the chest, hæmorrhage from the lungs at the time the menses should occur, tendency to cold hands and feet, quick pulse, etc.

Given in grain doses of the 1st, 2d, or 3d triturations, it often acts beautifully in restoring the patient in a short time.

Not only is it useful in pulmonary complaints, but it is one of the best remedies we have for so-called *scrofulous* manifestations.

It answers fully Hahnemann's indications for the use of Calc. carb. in scrofulous affections, especially when occurring in children, namely, the overgrowth, the large head and open fontanels, the distended abdomen, the tendency to swelling of lymphatic glands, the tendency to brain affections, to catarrhal discharges, abscesses, etc.

It is excellent in the morbid physical development and mental

precocity of young persons about the age of puberty, but in such cases it should be used in the high attenuations (30th trit.).

For too late appearance of puberty, with lax fibre, and in fat, lymphatic persons, with languid circulation, torpid intellect and stupid mental condition, this medicine in grain doses of the $\frac{1}{10}$th, or even the crude, given with the meals, often acts very favorably.

I have succeeded in curing several cases of *incipient tubercular meningitis* in children with this salt, in about the same doses. The symptoms and conditions will be found in Vol. I, "Special Symptomatology."

There is a condition into which children often lapse after attacks of exhausting diseases. It is called the *hydrocephaloid disease*, and is often mistaken for true hydrocephalus. Adults, after severe fever and prostrating maladies, often get into the same state.

In this condition the Calc. hypo., aided by a liberal diet and the careful use of stimulants, will quickly cause the patient to rally from the apparently dangerous state.

After exhausting diseases of any kind, patients are often annoyed by a *hacking* cough, with soreness and tenderness of the chest. Calc. hypo. cures this cough.

In *marasmus*, from mesenteric disease, I know of no better remedy, especially if the child has previously been too fat, of flabby flesh, etc.

In common with many others of our school, I find it, alone, or in connection with China, the most useful remedy we possess against the effects of exhausting discharges of blood, semen, mucus, pus, or any abnormal secretion.

In suspicious *chronic diarrhœa*, when phthisis abdominalis is feared; in wasting *leucorrhœa*, from the uterus and vagina; in *diseases of the bones*, with caries and purulent discharges, and spinal curvature in strumous children, and even in rachitis, you will find it a remedy not to be dispensed with.

The Calc. carb. has been used since the time of Hahnemann, to facilitate the process of teething in children, and for deficient growth of osseous structures. Where the trouble depends on the scrofulous diathesis alone, that preparation will suffice; but in cases where the *nervous energy* of the child's system is *deficient*, the Calc. hypophos. is greatly superior. On the contrary, if the

nervous and *vascular* systems are in an excited and irritable condition, and congestions or spasms, or both, are threatening, I prefer the Calc. brom. to any other preparation of lime.

Since the last edition there appeared in the "Hahnemannian Monthly" a proving of Hypophosphite of lime, by A. R. Barrett, M.D., of Richmond, Va., which I give entire:

I had just been reading a pamphlet upon the use of Hypophosphite of lime in phthisis, and having some of the 2d decimal trituration, I experimented a little with it. A friend was in my office at the time who took some also; we each took one grain. The symptoms, which followed within an hour, and continued possibly an hour or more, are these: We first felt a dull heavy pain, pressive, on top of the head, across the whole top, between the frontal and occipital bones; it gradually increased and we correspondingly grew gradually more depressed in feelings; then followed great fulness and sensation of oppression around the heart, and a fulness throughout the whole thorax and head, the veins upon the hands, arms, neck, and head standing out like cords; no flushing, no perceptible increase in pulse; had a difficulty of breathing, must have window open; profuse sweat all over; limbs *perfectly powerless;* unable to arise from the chair, or move either arms or legs in the least; gradually we found ourselves unable to speak except in low monotone, evidently from muscular inability. There seemed to be a *total loss* of all desire, together with inability, to move or make any muscular exertion. These symptoms were perhaps an hour reaching this point, lasted about half an hour, then began gradually to pass off. As they did so the pain left the top of the head and passed to the forehead; pain extending from right to left temple throughout the extent of the whole frontal bone, a dull pressive pain; the muscular system gradually recovered its power of action; sense of dilatation and oppression around heart and thorax passed away, and finally we were left with only a sense of mental depression.

There was no pain anywhere except that mentioned. We are both under 40 years of age (between 35 and 40), weigh about 120 or 125 pounds, light complexion, light hair, nervo-sanguine temperament, both in good health. I have never seen any proving of Hypophosphite of lime.

It seemed evident to me that the nerve centres were powerfully affected, and that the symptoms were of a paralytic nature. When the symptoms had passed off our lips seemed dry and cracked as from fever, and we had considerable thirst, but the pulse showed no variation from its normal condition (75 to 80), except possibly being a little more feeble than usual, part of the time; temperature was normal.

HYPOPHOSPHITE OF POTASSA.

This salt has a different range of action from the Calc. hypophos. The latter acts by preference on the nervous and bony

structures, on the glands and the assimilative functions, while the former acts on the *muscular system*, as well as on the nervous, and while it has some action on the same tissues and functions as the lime, that action is not as intense.

The potash-salts are all muscular-tissue remedies. Study the action of Kali carb. and Phosphorus, and you will find pictured forth in them the salient features of this salt.

A characteristic indication for the use of this remedy is "great debility, especially when attended by marasmus and *wasting of muscular tissue.*" Another, equally characteristic, is the presence of that condition so thoroughly described by Dr. Inman, namely, *myalgia*, or a painful condition of the muscles of the whole body. Under this name is included all those conditions which are erroneously called chronic muscular rheumatism, pleurodynia, spinal irritation, lameness, cramps, and it even simulates peritonitis!

The potash-salt affects the bronchial mucous membrane in preference to the parenchyma of the lungs, and is most useful in asthma and chronic bronchitis. In lung affections, attended with severe thoracic pains, it is, like Kali carb., a splendid remedy. It relieves the pains from excessive coughing, and brings back a cough in patients whose thoracic muscles have become so weak that they cannot cough.

Like Phosphoric acid and China it restores the health, when broken down by loss of fluids, especially the muscular weakness from *undue lactation*, from loss of semen, loss of the phosphates (in the urine), and profuse expectoration in phthisis.

It is an excellent remedy in that condition known as *oxaluria*, with dyspepsia, lowness of spirits, emaciation, etc.

It is one of the best of the few antidotes we have for the effects of *excessive tea-drinking*, or rather for the excessive use of tea, without a proper amount of nutritious food at the same time. Tea, even green tea, can be used largely without injurious effects, if an abundance of nitrogenous food, such as beef, mutton, fat, eggs, etc., is taken with it. The potash takes their place to a certain extent, and prevents further waste for a time.

In *anæmia with emaciation*, this salt should always be given with the preparations of Ferrum, for it aids the action of Iron greatly. In anæmia or chlorosis, without loss of flesh, but a

bloated or dropsical tendency, the Calcarea, or Natrum salt, is more appropriate.

The remedies which alternate or follow with good effect the Kali hypophos. are China, Hydrastis, Helonias, and Aletris. In pulmonary affections it is often alternated with Rumex, Sanguinaria, and Sulphur, with good results.

The Hypophosphites of soda (Natrum), of Iron, of Ammonia, and Zinc, have been used, but not very extensively, except the Soda salt, which is a great favorite with me in general nervous debility, uncomplicated with other ailments. A reference to Vol. I will show that in the conditions mentioned the Kali hypo. has usually been given in doses of one quarter to one or more grains several times a day. In my practice I use the aqueous tincture and the first and second decimal aqueous dilutions in doses of ten to thirty drops. It cannot be triturated owing to its deliquescent character. The mother tincture is made by adding one drachm to nine drachms of distilled water.

IBERIS AMARA.

The *Iberis* (Candy-tuft) belongs to the family *Cruciferæ*, of which *Sinapis* (Mustard), Raphanus (Radish), and Thlaspi (Shepherd's purse), are members. The *genus* was named Iberus by Dioscorides, and the name is supposed to be derived from Iberia (Spain), its place of natural growth. The habitat of all but one species is the south of Europe. The Iberis amara is a native of England, and is found in great plenty in Berkshire. None of the species are North American.

The Lepidium boniraense of South America, a near relation of Iberus, has been proved by Dr. Mure, of Brazil. Its heart symptoms are notable, and resemble those of the Iberis amara.

My attention was first called to this medicine by a brief observation in Wood's "Practice," vol. ii, p. 184, where, in giving the treatment of hypertrophy of the heart, he mentions that "Dr. Sylvester speaks highly of the Iberis amara in that disease. He gives the seeds, rubbed to powder with Cream of tartar, in doses of one to three grains. The remedy was first brought into notice by the late Dr. Williams, of London."

Since my attention has been specially directed to cardiac diseases, I have frequently been tempted to prescribe Iberis, but we had no proving to guide me in its selection. But in the winter of 1871–72 I found three students in the class of Hahnemann Medical College who were willing to make provings of the drug. These provings fully verified the supposition that it had a specific action on the heart. They were published in the "United States Medical and Surgical Journal," of 1872, pages 295–313. The provers were Drs. Sabin, Dodge, and Magee, and their principal symptoms agree very well.

The *sphere of action* of Iberis is undoubtedly upon the *heart*, and those organs most under its influence. In its affinity for the heart it may in time rival Digitalis, Cactus, Collinsonia, and Lycopus.

The *primary* effect of Iberis appears to be to lessen the *force* of the heart's action without lessening its *velocity*. "It possesses the property of controlling the *violence* and *sharp* action of the heart, and *softening* the pulse; hence its great value in hypertrophy with dropsy." (Sylvester.) The *italics* are my own; they give standing to the provings, for you will observe that the pulse was *softened* in the provers, even during palpitations. Primarily, then, it depresses the *force* or *impulse* of the heart, when given in doses of one to three grains several times a day. It is to be presumed that the hypertrophy which it remedied in Dr. Williams's practice was from *thickening* of the heart's walls, a condition in which the impulse is powerful. Hypertrophy, with dilatation, has impulse *not* powerful, but with *excessive action*. While it was primarily homœopathic to the *latter* condition, I think it would be secondarily indicated in the former, for if it depresses the heart for a long time, the reaction (or secondary effect) would be to the other extreme.

I imagine that it does not act on the *accelerator* or the *retardator* nerves of the heart, but either on the nerves which supply the heart with its *force*, or upon the ganglia of the heart itself.

One characteristic of the drug appears to be that its primary *depressing* action is rather transient; the secondary, or *exciting*, more persistent.

Its action on the *liver*, *kidneys*, and *chest*, so far as the symptoms

go, appear to indicate that it acts like Digitalis. Like Digitalis, it causes severe vertigo and intermittent pulse, but does not cause the *slowing* characteristic of Digitalis.

I have used it in a few cases of *hypertrophy with dilatation*, when there was excessive action without much force, vertigo, scanty urine, clay-colored stools, and troublesome cough. These symptoms it appeared to remove. I used the 3d dilution, in five-drop doses, every four hours.

In *hypertrophy with enlargement*, I should use it in the same doses of the 1st dilution or trituration of the seeds.

Dr. Williams used it successfully in *asthma*, probably *cardiac dyspnœa;* in *bronchitis*, perhaps from cardiac trouble; and *dropsy*, undoubtedly cardiac.

Dr. Sylvester says he has "prescribed it for ten years, in numerous instances, for these diseases, always with some benefit, and sometimes with almost magical efficiency." He admits that in his doses it "occasionally induced giddiness, sickness (nausea), and diarrhœa."

The ancients made much use of Iberis. Pliny says it was used in *gout*. Galen used it in "*rheumatic affections of the hip-joint.*" Archigenes prescribed it in disease of the *spleen and hip*.

It is worth while to observe that the Nasturtium, a plant akin to Iberis, is used in dyspnœa. Many of the "Cresses" are used in asthma. Iberis is a cress.

It may be that it is specially homœopathic to diseases of the heart of a rheumatic or gouty nature.

Theoretically I would advise you to try it in *jaundice* occurring in persons with heart disease; in *bronchial cough* from a similar cause; and in some *congestions of the head* in young persons about puberty, in elderly persons, or women at the change of life.

Since the provings were published, two years ago, no report of its clinical use has been made, nor have I heard of its use in other hands than mine.

I have been surprised at this, for our cardiac remedies are not many, and those we have are not fully developed.

IODIDE OF ARSENIC.

This preparation of Arsenic has been a favorite remedy in my practice for many years. *Its sphere of action* is quite decided. I know of no medicine which is so certain in its curative action when prescribed according to its characteristic indication. That indication is sharp and well defined. It is *the peculiar and persistently irritating, corrosive character of all the discharges.* No matter what the disease is; no matter from what source the discharge arises; if the discharge irritates the membrane *from* which it flows, and *over* which it flows, this medicine is fully indicated. In this respect it resembles *Nitric acid, Ailanthus, Arum, Arsenic,* and a few others; but none possess the symptoms as prominently as this. The discharge is often fetid, not always; it is generally *watery,* not always; the mucous membrane, where it has its origin, is always red, angry, and sometimes swollen.

When the discharges (especially in catarrh or influenza) are attended with *alternate chills and heat,* I give it alone. When there is heat alone, or chills alone, especially if the chills run up the back, I alternate it with Gelseminum. (Gelseminum has a discharge thin, watery, and profuse, but not corrosive and irritating.)

The diseases in which I have found it useful, and in which it generally acts speedily, are

Epidemic influenza, whether a *catarrhal fever,* a "bad cold," or the "epizootic," so called. When the "horse disease" swept over this country I carefully studied the symptoms as narrated by the newspapers, and I resolved, in case it reached Chicago, I would give the Iodide of arsenic to my horses if attacked. I saw many cases in all stages, and was struck with the similarity of all the symptoms, and the general condition of the animals, to the symptoms of Arsenic, particularly the iodide. I publicly advised its use, and gave it to my horses, and to those of my neighbors, as a *prophylactic.* The result was that in many cases it cut short the disease when well under way, and prevented, almost entirely, its attacks in those horses to whom it had been given as a preventive. The disease afterwards attacked men, women, and children, and this medicine was the specific remedy in nearly every case I treated,

although, as before mentioned, Gelseminum was of great assistance.

It is the nearest to a specific for *catarrhus æstivus*, or hay-fever, that we now possess. I have cured many cases of years' standing; I have modified many habitual attacks so that they became bearable and did not drive the patients to Mackinaw. And in many epidemics similar to hay-fever it acted magically, sometimes arresting the attacks in a few hours.

In old *nasal catarrhs*, when the discharge becomes bloody and fetid, scabs and pus come from the nose, and the irritation extends to the throat, the Iodide of arsenic, continued for some time, together with the use of a douche of Glycerin and water, effectually cures. In these cases it is superior to Silica, Hepar sulph., or Kali bich., so highly praised in our text-books.

It is equally valuable in *chronic scrofulous ophthalmia, with ulceration;* in *otorrhœa with fetid, corrosive discharge;* in *corrosive leucorrhœa* with too *frequent and profuse menses* (generally with ulceration of the os); in *diarrhœa* (so common in children and in consumptives), when the evacuations "scald," irritate, and make the parts sore and excoriated.

In *malignant diphtheria, scarlet fever,* and *small-pox,* it should never be forgotten, for it will effect an alteration of the malignant processes quicker and surer than any other medicine.

I have found it of great value in *hypertrophy of the heart with dilatation,* when the patient was troubled with severe and violent palpitations, with great anxiety in the region of the præcordia, asthma and dry cough.

It has been found very beneficial in *aphonia* when occurring in thin, impoverished persons, in whom some psoric taint manifests itself in the form of a dry, scaly eruption on the skin.

Cough.—It has cured a chronic *dry cough* in patients resembling those first described.

Marasmus ought to be cured by this preparation more speedily than by Iodine or Arsenic alone.

Tumors of a malignant character.—Dr. L. B. Wells, of Utica, N. Y., cured a lady, of forty-nine, of a swollen gland in the left axilla, size of a hen's egg, hard, and exuding a fluid which formed a hard, brown crust. The tumor was very painful and sensitive

to the touch. The breast of the same side was also enlarged, indurated, and very sore. She also had yellow, bloody, and irritating leucorrhœa, with swelling of the labia. Iod. of Ars. 6th cured the whole in a few weeks.

In *Bright's disease* with *dropsy*, it may prove a better remedy than Ars. alb.

In *obstinate eruptions of the skin*, it has acted better in my practice than Ars. alb., particularly in *dry, scaly, burning, and itching* eruptions, such as *lepra, impetigo, psoriasis, tinea, furfuraceous pityriasis*. Also in old, irritable *ulcers*, with sanious, corrosive discharge and burning pains. When these affections occur in scrofulous subjects, with swollen lymphatic glands, the Iodide of arsenic is specially useful.

In those sudden attacks of *erythema*, affecting the head, face, neck, and hands, with intolerable itching and burning, and ending in branlike desquamation, and which I believe to be hay-fever under a masked form, this medicine acts better than Rhus.

My two favorite triturations of this medicine (for I never use it in dilution) are the 3^{x} and 6^{c}, the former for adults, the latter for children and delicate patients of any age.

IODIDE OF BARYTA.

In your studies of the old remedies you will remember the recommendation given for the Carbonate of baryta, namely, "Scrofulosis: swelling and induration of the glands, especially the cervical glands, even after suppuration has set in." Of the Muriate, it is said to be the best remedy for "stonelike induration of the glands," and a "tendency to tonsillitis." This last recommendation has been verified by a great many practitioners who are enthusiastic in its praises, not only as a preventive, but as the best remedy in acute quinsy, which it is said to arrest in the forming stage, preventing suppuration.

Allopathic authorities, especially the older writers, claim that Baryta "resolves and liquefies abnormal accumulations wherever found." It is eminently a glandular remedy, and possesses specific power over the absorbents equal if not superior to Iodine and others of that class. Its use, except by homœopathists, has been

greatly neglected until of late Dr. Hammond has recommended the muriate in *sclerosis of the posterior columns of the spinal cord*, a condition better known as "locomotor ataxia," the morbid anatomy of which consists of an *atrophy of the cord*, with *hypertrophy of the connective tissue*. The same pathological condition may occur in the brain. It is then known as *cerebral sclerosis* or *atrophy* of the brain. For these conditions, Hammond recommends the Chloride of barium in doses of one-half or two-third grains three times a day.

If you will refer to Hahnemann's recommendation for Baryta, you will find that he mentions many of the symptoms caused by cerebral and spinal atrophy, such as the diseases of old age, imbecility, paralysis, loss of co-ordination of motion, etc.

It appears to me that Hammond has hit upon the pathological keynote for the use of Baryta, namely, a *hypertrophy of connective tissue*. The *atrophy of nerve substance* is a necessary result of such a condition.

The difference between Iodine and Baryta appears to be this, that whereas the former is curative in soft hypertrophy of glandular or connective tissues, the latter is useful in *hard* indurations. In this respect it is analogous to Conium.

Several years ago it occurred to me that the chemical union of Iodine and Baryta would form a medicine whose effects would be just what we desire in the treatment of cases of glandular enlargement with a tendency to induration. I therefore procured some freshly prepared Iodide of baryta, and prescribed it in *hypertrophy of the tonsils*. The result was very gratifying. It effected a rapid diminution in the size of the glands, even when they had been indurated for some years.

In one case it not only had this effect, but it greatly relieved the symptoms arising from an enlargement of the *prostate gland*, with which the patient had suffered for some time.

It will not act as well as the Muriate or Carbonate in acute tonsillitis, but it is better adapted to the resulting hypertrophy with induration.

I would strongly urge you to test its powers in *enlarged and indurated testicles* and *ovaries*, also in *goître*. In one case of *indurated testicles* it diminished their size quite notably. In another

it evidently aided the action of the galvanic current in reducing the hypertrophy.

I would also advise its use in *enlargement of the mesenteric glands* in scrofulous children. It may prove useful in some cases of *mammary hypertrophy.*

Dr. Liebold, of New York, a celebrated oculist of our school, has been successful in its use for certain *diseases of the eye.* You will find his paper in the "Transactions of the American Institute," 1873.

In the "New York Transactions" for 1873–4, you will find a paper by our Professor of Ophthalmology, Dr. Woodyatt, on its use in *syphilitic keratitis interstitial.* He reports a case complicated with enlarged cervical glands, which was cured by this remedy. He advises it in *suppurative inflammation of the middle ear, phlyctenular conjunctivitis,* and *scrofulous ulcers.* He does not give the dose. I usually prescribe the 2^{x} or 4th trit. several times a day.

IODIDE OF LEAD.

This drug has been very little used by our school. It was recommended by some French physician for *diphtheria,* but no characteristic symptoms were given. I cannot imagine any Plumbum symptoms indicating its value in that disease, and believe all the effects due to its use came from the Iodine.

A long time ago, in a paper on atrophic ovarian amenorrhœa, Dr. Peters recommended it for that condition, but on purely theoretical grounds; but, upon the same grounds, I should prefer the Iodide of barium.

There are others of the Iodides which may become valuable remedies. One of them, the

IODIDE OF SULPHUR

I have used a good deal in obstinate skin diseases, notably in *barbers' itch,* for which it is almost a specific. I prescribe the 3^{c} trituration internally, and the cerate rubbed in night and morning. The cerate should be made of the strength of one or two grains of the Iodide to an ounce of Cosmoline or some other vehicle.

It is also useful, used in the same manner, in large and painful suppurating *acne of the face* in young people.

Dr. Scudder, in his "Specific Medicine," recommends the

IODIDE OF AMMONIUM

For a chronic, persistent *headache* in young or full-fed persons, accompanied with a stupid, heavy look. Such headaches are often caused by close school-rooms or confinement indoors. He gives a few grains three times a day.

We ought to prove the Iodides of silver, Cadmium, and others, for we may find in them remedies for conditions and symptoms for which we have now no specific.

NOTE.—Since writing the above, I find in the "Journal of Pharmacy" the following, by Dr. Garrod, relating to Iodide of cadmium. He says all the other Iodides, when used as external applications, have a bad odor, or stain the skin or clothing. But, he adds, the

IODIDE OF CADMIUM

Possesses all the valuable qualities of Iodine, when applied externally. It has no odor, nor does it stain. It forms a perfectly white and soft ointment, producing but little local action upon the skin, and is readily absorbed when applied by friction. Under the use of this ointment he has witnessed, in many cases, *enlarged glands* of a scrofulous character rapidly reduced to their normal dimensions. He has seen it give great relief in *nodes* and chronic inflammation of the joints.

Some homœopathists do not disdain to use remedies externally. To such, this will be an improvement over the usual ointments of Iodine. One part of Iodide of cadmium to ten of Cosmoline is the proper proportion.

ILEX AQUIFOLIA.

This is an evergreen tree, from ten to twenty feet high, growing in the southern United States as well as in Europe. The Ilex

opaca belongs to the same genus. Rafinesque considers it merely a variety, and says that the properties of both are the same. "The decoction and wine have been used for cough, pleurisy, colic, gout, and rheumatism." Browne (Sylva Americana) says the berries, fifteen to twenty of them, will cause vomiting and purgation. There is another species, the *Ilex vomitoria* (Cassena), which is regarded by the Indians as a holy plant, being used by them in their religious rites for the purpose of cleansing their bodies of all impurities. It seems to possess the power of causing vomiting persistently and thoroughly, with but little pain or consequent prostration. The *Ilex Paraguayensis*, or Paraguay tea, is used by the natives of that country much as Chinese tea is used by us. It is said to "give sleep to the restless and spirit to the torpid." It is said to contain *Theine*.

The only mention of the Ilex which I find in our literature is in vol. lxxxvii, p. 148, of "A. H. Z.," by Dr. Hendricks, who cured several cases of "*rheumatic inflammation of the eye*, with periostitis of the frontal bone, which almost always leads to staphylomatous degeneration of the cornea." He used the first dilution of the *Ilex aquifolia*, five-drop doses, four times a day, for eight days.

IRIS VERSICOLOR.

The Blue flag was introduced into our Materia Medica by Dr. Kitchen, of Philadelphia. It was proven by Drs. Rowland, Holcombe, Burt and Sanford.

It is one of the best-proven remedies in use, and possesses valuable and peculiar powers. It had a great reputation among the aborigines of this country, who transmitted an account of its virtues to the early pioneers, thence to the "botanic" doctors, then the eclectics, and finally it assumed a dignified position in the hands of homœopathists.

I think we had no provings of Iris at the time of Dr. Kitchen's first use of it. He gave it for its well-known violent effects in large doses, of which the most prominent is *vomiting*. I shall give, in its proper place, an extract from Dr. Kitchen's original paper.

The *sphere of action* of Iris includes the *gastro-intestinal mucous membrane*, and *its glandular apparatus*. It alters the secretory functions of these glands, changing the secretions to a peculiar *acid* condition. In this it resembles Pulsatilla, Robinia, Chamomilla, and Calcarea. It was supposed that it had a specific action on the *liver*, but I doubt it. Its irritating action on the duodenum may account for its hepatic symptoms. I do not assert that it has no power over the *secretory* function of the liver, for it acts powerfully on the *salivary* and *gastro-intestinal glands*, and it is supposed to act specifically on the *pancreas*.

It has a decided action on the *skin*. It produces vesicles, which dry up, leaving a purulent scab; and *pustules*, which are sore and painful. Dr. Alabone, of England, reports cures of cases of *psoriasis* in irregular patches. In this respect it resembles Phytolacca, Rhus, Sulphur, and Sepia.

It has been found very useful in *pustular eruptions on the head and face* (*tinea, prurigo, crusta lactea, eczema*, etc.), especially in children. I have used it successfully, and find that a characteristic indication for its use is the *acid diathesis*, or an acidity of the secretions. When a child has sour breath, vomits sour ingesta, and has a watery or green sour diarrhœa, and has at the same time a pustular, or even vesicular eruption on the head, face, or body, give Iris 3x, and, if you wish to hasten the cure, use an Iris cerate.

I do not think the Iris is properly a fever remedy. If it causes febrile symptoms, as it appears to do in the provers, it is from gastro-intestinal irritation. Dr. Kitchen used it in *fever*, but a perusal of his cases show them to be of a gastric or hepatic origin. You will find it a valuable auxiliary in the treatment of *bilious, gastric, and enteric fever*, when its symptoms accurately correspond, *i. e.*, when vomiting and diarrhœa of acid, bitter, bilious matters, with severe pain in the head, are present.

Its greatest reputation has probably been that of a *sick headache* remedy. It is equally useful in the *bilious headache*, also in certain *nervous headaches*. A majority of the *headaches* of Iris are reflex, proceed from acid stomach, or irritation of that organ from acrid secretions. It seems, however, to be capable of causing an idiopathic nervous headache or neuralgia.

The Iris headache generally occupies the forehead and *right* side of the head; *aggravated* by rest, and on first moving the head, but relieved by continued motion; accompanied by lowness of spirits, nausea, and acid vomiting. Dr. Kitchen, who published the first clinical experience with this remedy, says of its use in "sick headache:"

It is the most prompt and effectual remedy I have ever given in this truly annoying malady. The first dose will arrest the trouble in some patients. I have experienced this effect in several cases. I have made comparative trials with it and other remedies, telling my patients to observe and let me know which number would relieve them the most speedily. They have invariably sent for the number attached to Iris on the attack; this I consider conclusive respecting this complaint, so that I need not comment on it further than to recommend it very highly so far as my experience goes.

The Iris has been tested by many homœopathic physicians in sick headache, and the testimony is generally in its favor. From our knowledge of the sphere of action of this medicine, it would seem most likely to be indicated in those "sick headaches" of a *gastric or hepatic* origin. In the purely "nervous sick headache," or that variety arising from *congestion*, other remedies may prove more useful. This matter, however, can only be decided by careful observation.

In *neuralgia* of the head, eyes, etc., Dr. Kitchen recommends the Iris:

A lady afflicted at intervals with this most distressing complaint, who had swallowed the whole allopathic and homœopathic Materia Medica, with only partial benefit, has been more relieved by the Iris than by any remedy I have yet administered to her. It is usually in the head, temples, eyes, etc., and attended with most distressing vomitings of a sweetish mucus; and occasionally, when there is much straining, with a trace of bile. It is the only medicine which has much control over the stomach, arresting the vomiting in the few trials I have made with it very soon, and allaying, in some degree, the violent pain in the head, so that I have been asked by her whether I had not given her Morphine. I have been asked the same question by patients in bowel affections, they frequently going to sleep after its administration; this is easily accounted for by the cessation of pain, which is almost invariably followed by sleep.

Dr. Holcombe found by proving Iris that it caused a peculiar *facial neuralgia*, which he describes as follows:

A neuralgia involving the supraorbital, infraorbital, the superior maxillary,

and inferior dental nerves; it begins after breakfast, every morning, with stupid headache, and lasts many (20) hours.

He reports that he has verified these symptoms in practice. Writing of its sphere of action he says:

The inference I draw from this fragmentary proving is that Iris, in small doses, often repeated, acts on the male system, sanguineo-nervous constitution—especially in the morning, especially on the right side—from the right to the left, from above downwards, from the animal system to the organic system; indicated in the former by facial neuralgia and copious limpid urine; in the latter by flatulent colic and burning tenesmus.

My own experience leads me to believe that the Iris, like Pulsatilla and Nux, has a twofold action on the nerves of the face and head, namely, a *reflex* and *direct;* the former from deranged stomach, the latter from its direct action through the blood as an irritant. Not only does it cause neuralgic pain in the head and face, but in other parts of the body. In Rowland's proving, the pains were called by him *rheumatic,* and they may have been. Every physician knows how prone are those patients who have gastric derangements to have neuralgia and rheumatic pains all over the body, and how quickly they disappear when the condition of the stomach is corrected.

Rheumatalgia of the right shoulder, wrist, hand, and in the right hip, knee-joint, and foot, is cured by Iris.

In commenting on the eclectic use of Iris, in the second edition of "New Remedies," I used the following language, which is equally applicable now:

The eclectics class this plant among the "sialagogues." Dr. Burt, who proved the fresh root in large doses, does not doubt that it would produce sloughing and deep ulceration if continued for a long time. There is a rather curious and remarkable similarity between the action of the Iris and that of Mercury; this is all the more singular when we consider that the former is a vegetable remedy. Not only does the Iris affect the mouth in a similar manner to Mercury, but this similarity of action extends throughout the whole glandular and mucous systems, and perhaps all the tissues except the *osseous.* I have taken patients from off the hands of eclectic physicians, who were so completely sali-

vated by the Iris, that were it not for the absence of the peculiar *fetor*, I should have taken it for a mercurial salivation. Even the sympathetic fever, which the Iris causes, has considerable resemblance to that of Mercury.

Eclectic authors thus speak of the Irisin:

Irisin is justly esteemed as one of our most valuable alteratives. It is eminently resolvent, and exercises a marked influence over the entire glandular system. It increases the salivary flow, and has the reputation of producing ptyalism. But a careful distinction must be made between the effects produced by vegetable agencies upon the mucous and salivary glands, and mercurial salivation; the former are nothing more nor less than manifestations of a quickened physiological activity—evidence of a special therapeutic stimulus constituting oftentimes a critical conservative effort—no loosening of the teeth; no sponginess of the gums; no putrefactive odor; no sloughing of the soft parts; increased but not disordered secretion. On the other hand Mercury induces a pathological condition of the vital constituents of the blood and fluids, and favors the formation of vitiated products; altering from good to bad, and from bad to worse; giving rise to congestions, lesions, putrefactive conversions, and disorganizations of the organic structures. In the former case we have the evidence of a direct therapeutic stimulus, operating upon the vital impressibility of the secretive apparatus, promoting increased activity of the functions for the purpose of eliminating legitimate products. In the latter instance we have an augmented flow of morbid material, resulting from the destructive conversion of the vital constituents by the remedy itself, and which are not the legitimate products of organic metamorphoses. In the former case, the remedy itself is the mother stimulus, while in the latter instance the mercurial corruptions constitute the stimuli of excitement.

To the superficial student of medicine, the above *reads* very well, but to the physiologist it becomes simply absurd. Only one conclusion can be drawn, namely, that the writer is *ignorant* or *dishonest*. Nothing but the gravest ignorance of the elementary facts of physiology and pathology could lead to such special pleading. He must be aware that any *departure from a normal physiological state constitutes a pathological condition*. Given to a person in perfect health, the Iris causes abnormal activity of the glandular and mucous systems; Mercury does as much. The main difference between the actions of the two medicines is in *degree*. The poisonous effects of Mercury are all-pervading and more malignant than the pathogenetic effects of the Iris. Both cause actual pathological conditions, having their peculiarities and characteristic symptoms. When given in disease, if homœopathically indicated,

and administered in proper doses, they restore the tissues, for which they have an affinity, to a healthy condition.

If this author was dishonest in his statements, with the intention to prejudice the reader against Mercury, his conduct degenerates into downright meanness. Mercury, when administered according to the law of similia, is a beneficent and valuable curative agent. When given in this manner, it never causes any pathogenetic symptoms, gives rise to no morbid products, and disorganizes no tissue or secretions. On the contrary, it tends to prevent the very calamities which eclectics so much dread, and which he could cause to a certain degree by the abuse and prolonged use of even the Iris. I would here make an observation relative to the action of Iris, namely, it is *not* owing to the acridity of the fresh root acting topically, that the pseudo-mercurial symptoms are due, but to a specific dynamic action of the drug on the constitution. It is true that the Iris *does* contain an acrid principle, but the fact that the dried root, and even the alkaloid, causes the above-named condition when taken into the stomach, is proof that those effects belong to the whole drug. If this was not sufficient proof, we could refer the physician to the fact, that this peculiar action may be caused by the dilutions of the remedy up to the third, and perhaps higher.

It is a strange comment on the practice of the eclectic school that they should recommend the Iris highly in *mercurial cachexia, syphilis, etc.!* No drug is more thoroughly homœopathic to diseases of the mouth similar to those caused by Mercury, and in the few cases in which I have used it it has acted well. Even in Mercurial salivation it has been found useful, but it cannot be relied on with as much confidence as its chemical antidote, the Chlorate of potash.

In *stomatitis*, with or without ulceration (canker), when there is painful *burning* in the mouth and fauces, Iris is strongly indicated. In these cases I would advise the tincture of the green root, administered in the third or sixth attenuations.

W. H. Burt, M.D., gives the following case of *ptyalism*, following diphtheria, cured by Iris versicolor when all other remedies had failed:

In a very severe case of salivation in a young lady after she had been attacked with malignant diphtheria, where the parotid glands were much swollen, and

the saliva discharged in immense quantities—apparently three quarts a day would be secreted and spit from the mouth—I gave Mercurius, Aconite, Belladonna, Kali bichromatum, Iodine, and Nitric acid. Not one of them had the least effect. I then gave Iris, and in two hours there commenced to be a change for the better. In two days the profuse secretion of saliva had entirely ceased, with a great diminution of the glands. The fourth day she was discharged cured.

Iris has probably an irritant action upon the gastric mucous membrane, as seen by its specific action upon the fauces, stomach, and œsophagus. By referring to Dr. Burt's heroic provings, this action will be seen portrayed in strong colors. I know of no one of the new remedies which promises to be more useful in gastric disorders than the Iris versicolor. Even now we have some valuable clinical observations.

Dr. Kitchen, in his paper on Iris, says it is useful in *vomiting:*

Effectual in almost all kinds—simple, sour, bilious, of food, with or without pain. In every case of vomiting or sick stomach in which I have yet given it, it has been successful, and in severe cases on the administration of a few teaspoonfuls. Such has been my experience, thus far, but I would not be understood as saying that this will always be the case in future. No doubt it, like all other remedies, has its appropriate sphere, which it will take time and opportunity to make out and define correctly. I merely state what I have discovered up to the present, with the limited opportunities I have had of testing it in different forms of the disorder. I have for some years attended a little girl, now about nine years of age, who has periodical vomiting spells, coming on once every month or six weeks, sometimes not for four months, but certainly three or four times in the course of a year. I have tried in various attacks all the different remedies usually successful in such cases, but not with much benefit; the attack would last two or three days, and would seem to wear itself out. A single teaspoonful of the Iris arrests it at once. It comes on with vomiting of the ingesta, then sour fluid, and at last bile, yellow and green, with great heat of the head, some general fever, and great prostration. The perspiration is warm, caused by the efforts of straining and vomiting.

The Iris is eminently homœopathic to some varieties of *gastritis* (mucous), *œsophagitis*, *duodenitis*, and many of those disorders of digestion which go under the general name of *dyspepsia*. In many points it resembles Pulsatilla, especially the tendency to "acidity of the stomach" and "rising of ingesta;" also the sympathetic disturbances having a gastric origin. The peculiar and severe symptoms elicited by Dr. Burt, and referred by him to the pancreas (see provings), and which, in all probability, were really

in the gland, point to its applicability to inflammation and other disorders of that important organ. In that disease known as "pancreatic salivation" it ought to prove specific. A thorough knowledge of the physiology of the pancreas will lead us to define pretty clearly the derangements likely to be caused by the Iris. The pancreas is usually regarded as belonging to the group of salivary glands. "The pancreatic juice is analogous to saliva. It acts upon starch even more energetically than saliva, transmuting it into sugar and lactic acid; and upon fats by forming them into an emulsion, so that they are readily absorbed."—*Draper.*

It is generally conceded that a normal pancreatic juice (as regards quality and quantity) is necessary to the digestion of fatty food. Many of the derangements of digestion are undoubtedly due to deficiency and unhealthy conditions of this juice. There can be no rational doubt of the action of Iris upon this gland. Even had we not Dr. Burt's suggestive provings, we could judge of its effects upon that gland from analogy. A remedy which irritates and stimulates the salivary glands, must have a similar action on the pancreas—a similar tissue, possessing similar functions. (Pulsatilla, Mercurius, Iodine, Podophyllum.)

Dr. Burt succeeded in killing several cats with the tincture of Iris versicolor. One of the most noted morbid appearances observed on examination was a highly congested condition of the pancreas. A portion of one pancreas was subjected to a critical microscopical examination, which proved the presence of intense congestion of the minute vessels, and even a rupture, and also extravasation of blood into the tissues of the gland.

Dr. Kitchen says "he cured a case of *gastrodynia*, characterized by violent pains in the epigastric region, coming on at intervals." The Iris relieved him at once, and he had no return. He has also relieved and cured "vomiting of food an hour after meals" with Iris.

It has been for many years one of my favorite remedies for *gastralgia.* Instead of prescribing Nux or Pulsatilla for all stomach pains, in a careless, routine way, study your cases. You will find Iris equal to any medicine we have in this complaint.

The Iris may be called a violent cathartic—it acts on all portions of the intestinal canal, but especially the upper portion. It

causes diarrhœa, with colic and flatulence, evacuations of watery, mucous, green, and even bloody stools, with tenesmus.

My experience so closely accords with Dr. Kitchen's, that I again quote from his original paper:

The *colic of infants* is benefited by it. There is a peculiar condition of the abdominal region of the adult also, which may come under this head, and which may be termed a grumbling bellyache. It is most prevalent at the changes of the seasons, spring and autumn, and appears to be owing to a vitiated secretion of the liver, and mucous membrane of the bowels, and consists in almost constant uneasiness and grinding in the bowels; a kind of sub-colic; a mushy passage once or twice a day, in some cases, but in the generality of cases, a very fetid discharge of wind, of a coppery smell, attended occasionally with an involuntary escape of fluid, soiling the shirt, and sometimes a passage of scybalous matter, together with fluid mucoid fæces of an offensive, putrid, and coppery odor. It was a case of this kind which first led me to a use of this remedy. I had tried several medicines without the least relief, for nearly a week, and administered the Iris at random, never having given it in any disease. To my surprise, the patient was shortly relieved, and had no return; his bowels soon became healthy and regular, and he praised the good effects of the remedy very highly. The sphere of the Iris appears to be chiefly the stomach and abdominal contents.

Diarrhœa.—I have not been able to obtain with any degree of accuracy the symptoms of those cases in which it proves to be the most appropriate. I think, however, that *burning* in the rectum and anus, after a passage, is one state which it will arrest almost immediately. It also seems appropriate to cases in which there are *pains*, and *green* discharges, relieving the pains very frequently in a short time, and changing the green passages after some doses have been given. There is one very curious feature which I have frequently observed, which is, that when the diarrhœa is not arrested after a few doses, it seems, after the administration of it for twenty-four or forty-eight hours, to produce an aggravation; there is an increase of pain and several free fetid passages, and then the diarrhœa ceases. This has generally taken place about two or three o'clock in the morning. Whether I have given it in too low dilutions, generally from second to sixth, I cannot tell, but such a feature I have frequently observed, and have administered it with perfect success in a few cases of *periodical night diarrhœa*, attended with pain, and two or three discharges before morning. I have also cured all my cases of *cholera infantum* with it this summer, and some of them within a few days. I look upon it as a very valuable addition to our remedial measures in this complaint.

In *cholera morbus* I have succeeded in every case in which I have administered it, even the most violent. A single teaspoonful of a few drops in half a tumbler of water, has in many severe cases put an immediate stop to the vomiting. I consider it a specific in this form of the disease, and I would earnestly request physicians to try it in the first cases of cholera Asiatica which may fall under their notice, and give the result to the profession. In cholera morbus it arrests the pain which is so violent in many cases at the pit of the stomach, or around the navel, or in some cases, still lower down in the abdominal region, at or be-

fore every fit of vomiting or purging. In fact it seems, as far as I have as yet been able to judge, the more appropriate the more violent the pain, and in some cases acting, as the patients and bystanders express themselves, "like a charm."

English homœopathists have found Iris very useful in cholera morbus, and even in true *cholera*. Dr. George Lade gives his extended experience with it in *autumnal diarrhœa and cholera*. He says:

Forty-three patients to whom I gave the Iris complained of simple diarrhœa only. The evacuations were in some instances papescent, but thin watery stools were now frequently observed; the majority of them were of a dirty yellow hue; some were brown, others green, and a few were apparently nothing but water. In all the cases there were more or less griping pains, principally in the umbilical region, which, with loud rumbling in the bowels, generally preceded the discharge. Heat in the rectum and anus was noticed in a considerable number, though not in all of the cases. For the most part the appetite was unimpaired, and in no case was there any feverish symptoms. Seldom more than three or four doses (of Iris 3d or Irisin 1st) were necessary to check the disease, and in no case had the medicine to be continued more than twenty-four hours.

Twelve patients had vomiting as well as purging, and recovered under the same remedy. Three patients had decided cholera symptoms. In these the Irisin had prompt and decided curative effects.

Dysentery.—Some mild cases I have cured with Iris, but it is not *the* remedy in this disease. The cases which seemed to be benefited were of the nature of dysenteric diarrhœa, attended with green discharges, or slimy mucus, without blood, or much straining. (Dr. Burt's proving elicited these very symptoms, however, and quite severely.) In one case it evidently acted favorably on the secretion of the liver, producing a free flow of healthy bile, and an immediate abatement of the unhealthy passages. In those cases in which there was bloody flux, I did not rely on it, not knowing sufficient of its curative powers.

The pathogenesis of Iris versicolor points directly to its sphere of usefulness in some varieties of dysentery, probably in bilious dysentery; yet there can be no doubt of the power of Iris to cause *acute mucous enteritis*, but the inflammation may be located higher in the intestinal canal than in ordinary cases of dysentery. (Here it appears the opposite of Aloes and Podophyllum, which affect the lower portion of the colon, rectum, etc.) It will be seen by the provings, however, that it has many symptoms analogous to Podophyllum,—"the prolapsus of the rectal mucous membrane," "pricking in the anus," etc. Dr. Kitchen's successful use

of Iris in abdominal typhus proves its applicability in some quite severe forms of intestinal inflammation, and perhaps in organic lesions of that canal. I would also simply add, by way of testimony, that many homœopathists, with myself, have found the Iris a valuable remedy in nearly every disease of the bowels for which Dr. Kitchen recommends it. I would also suggest its use in hæmorrhoids, bilious colic, fissure of the anus, fistula in ano, etc.

We have no proof beyond the bold assertion of the eclectics that Iris is of any value in syphilis. It may palliate some syphilitic symptoms, but that it has any specific relation to that disease I do not believe.

In gonorrhœa the same opinion may be expressed, although some of the symptoms indicate its power to irritate the male genitals.

It is said to cure *nocturnal emissions* with amorous dreams. I have never been able to cure spermatorrhœa with it. You will find in practice that nocturnal emissions are sometimes caused by acid states of the stomach and irritations of the bowels. In such cases Iris may be curative by reaching the cause.

When consulted in a case of spermatorrhœa, the first question to be asked is, "Do you have amorous dreams, with emissions?" If the answer is in the affirmative, I consider the case one of *irritation*, and would treat it with Phosphorus, Cantharis, Cannabis, Pulsatilla, and Iris vers. If a negative answer is received, the case is classed with one of those arising from want of tone and lack of vitality, and which calls for such remedies as Kali bromidum, Conium, Phosphoric acid, Agnus castus, and Caladium. This method of ascertaining the pathology of this affection was first laid down by the astute Lallemand, whose researches in this direction have been so valuable.

No proving of this valuable medicine upon the female organism has yet been made. Judging from its effects upon the male organs, we can safely consider it capable of deranging the female organs of generation. Eclectic physicians claim to find it useful in the treatment of "leucorrhœa, congestion of the cervix, ulceration, and other disorders of the uterine system." Coe thinks it "particularly indicated in uterine leucorrhœa, in which affection

it seems to be of almost specific value." As this variety of leucorrhœa is the result of a hypersecretion of the glandular follicles of the cervix, it is quite probable the Iris may act curatively, as its primary effect is to cause a similar condition in all glandular tissues.

I ought to add that Iris is recommended in *dropsy*. If it is a curative agent in that condition, it will probably be found that the disease causing the dropsy has its origin in the liver.

IRIDIN.

Drs. W. Rutherford, M. Vignal, and W. J. Dodds, have published in the "British Medical Journal" an exhaustive paper on the action of certain cholagogues on the dog, showing by diagrams the increase or decrease of bile secretion, according to the quantity of the drug, etc., administered. They have also tried on the human body the effect of *Euonymin* and *Iridin*, and find that the action is the same as on the dog, namely, a notable increase of bile. They state:—

"As yet we have four grains of *Iridin*, made into a pill with confection of roses, and taken at bedtime, a certain remedy for biliousness. It produces no disagreeable sensations, and on awaking in the morning the yellow tongue is found to be clean, and the headache and malaise gone. As Iridin, though a powerful hepatic, is not a powerful stimulant, it is well to give in the morning an ordinary mild saline aperient, such as Pullna water or some other. But Iridin, though an agreeable remedy at the time, leaves a somewhat depressing effect; and it probably should not be taken oftener than once a week or so." (In large doses. H.)

JUGLANS CINEREA.

The bark of the *Butternut* has been used as a cathartic, and for diseases of the skin, in domestic and irregular practice, for many years. This tree is indigenous to this country, as is the *Juglans nigra*, or Black walnut, which is closely similar to the *Juglans regia* or European walnut.

The Butternut has an oblong fruit, about two and a half inches in length by nearly one inch in diameter. The other two have a fruit nearly round. All the three species have many properties in common, but the Butternut is supposed to be the most active medicine.

The provings published in my second edition of "New Remedies," were made with tinctures of the bark, root, leaves, and twigs. All portions of the tree are medicinal, but the *inner* bark of the root is the most active. Eberle says it will "vesicate and pustulate" when applied to the skin. Rafinesque says the "green rind rubbed on tetters and ringworms dispels them." This I know to be a fact from frequent observations when a boy, and I know, too, that the juice of the green rind irritates the skin intensely, and a drop in the eye causes intense inflammation, lasting several days. Rafinesque says: "The fresh bark of the Juglans cinerea is *rubefacient* and blistering," and that an extract is a mild cathartic and almost specific in dysentery, jaundice, etc.

Dr. Clotar Muller recommends the Nux juglans (European walnut) for the same conditions.

A writer in the "Hygea," vol. xxii, Nos. 1 and 2, commenting on the pathogenesis of Nux juglans, very aptly describes the sphere of action of all these species. He says:

> In the digestive organs it causes derangement and irritation, which simultaneously call forth abnormal symptoms in other organs, especially the head. After this action, which is *brief*, appear various *exanthematous* symptoms, which appear late and run a chronic course.

I believe the same may be said of Antimony, Croton, and some other remedies. (Iris, Phytolacca.)

Its action on the bowels is said to be somewhat similar to Jalap, but I think it more nearly resembles Iris. The following intestinal symptoms were noted by provers:

Loose stool, which smells like onions; diarrhœa with burning in the anus before and after stool; tenesmus and burning after stool (primary); constipation (secondary); painless diarrhœa; four hours, without pain or griping.

Clinical Observations.—Dr. Neidhard states that it was found curative in the diarrhœa of soldiers in camp. Although allopaths assert it does not cause irritation of the intestines, it is doubtless homœopathic to diarrhœa. I know it causes griping, as does rhubarb, which allopaths say it resembles in its action, in not causing constipation as a secondary effect. Every homœopath knows that

constipation *is* a secondary effect of rhubarb, and the same may be said of Juglans.

King says it has been found useful in colo-rectis and several intestinal diseases, which it could not cure were it not homœopathic to them.

The symptoms show it to be homœopathic to *dysentery* and *bilious diarrhœa*, in which I have used it successfully in the 3d dilution.

I would advise you to try it in those *morning headaches* which resist the use of Nux vomica, Iris, Bryonia, and Chelidonium.

Dr. Horton, of Vermont, reports a case of "*throat* disease," which he calls "chronic inflammation," cured by Juglandin. He does not give the special symptoms or appearance of the throat on inspection, which renders his report of little value.

The same physician makes quite a specific of Juglans (or the active principle, Juglandin, which he prefers to the tincture) in many diseases of the skin. My own experience has been limited, but Dr. Martin, of Racine, values the Juglans highly in *chronic exanthemata*. I will give you Dr. Horton's experience in full. He says:

I take the liberty of sending you some of the clinical experience I have had with the Juglans cinerea, which I consider a real polychrest, so far as diseases of the muco-cutaneous surfaces are concerned. The Juglans has been used considerably by some eclectic physicians, and it was during the period that I practiced that system, that I became acquainted with it; but thus far I have never seen any reference made to it by homœopathic writers. Of this much, however, I am satisfied, that it is eminently homœopathic to the whole range of skin diseases, from a simple erythema to pemphigus, and theoretically, I should say to those of a more obstinate character. It seems to be equally as well adapted to congestions and irritations of the respiratory and gastric mucous membrane, and its use has been attended with such decided success, that I feel anxious to have the profession at large give it a trial.

I give below a few of the cases in which I used the remedy alone, for I used it a long time in combination, as is natural to eclectics, attributing the cures to other ingredients, when undoubtedly they were owing to the Juglans. I have treated cases of lichen and other mild cases of skin disease with the most positive results, but I send only a few of the more important ones, which you may add to your own and others' experience, if you had any with the remedy.

CASE I.—Forrest H., aged two years, had chronic ecthema of three months' standing; eruption general and almost confluent, so large and thickly set were the pustules. Those upon the face seemed to be drying somewhat, with the

steady increase and aggravation of those upon the body and extremities. Had been treated allopathically at first, when the parents becoming discouraged with the prospect concluded to employ an old doctress, who professed to do wonders with roots and herbs. Consequently the child had to endure another month of active drugging with the same discouraging result. At this juncture I was called, and found the little patient suffering excessively. He could neither sit nor lie, with any degree of comfort; worried much of the time; slept but little; appetite poor; diarrhœa. I prescribed Juglandin, first decimal trituration, ten grains in half a glass of water, a teaspoonful every two hours. Saw the patient again on the third day, at which time there seemed to be a little improvement. Continued the same treatment. At the end of the first week the improvement was decided; appetite better; slept more; bowels becoming more healthy. The crusts were rapidly drying and falling off. Continued the Juglandin two weeks more, at longer intervals, at which time there was only a few remaining pustules of small size, which rapidly disappeared, until the cure was complete.

Case II.—Jenny H., aged eight years; ecthymatous eruption upon the body, face, and arms, attended with a painful itching sensation that created an almost irresistible inclination to tear off the crusts. I gave her a vial of the first decimal dilution, from a tincture made from the inner bark of the root of the Juglans, to be taken in three-drop doses, three times per day. In two weeks she was cured, with the exception of some slight ulceration upon the arms, the result of tearing the crusts from some of the pustules; but these steadily healed, and in another week the cure was complete.

Case III.—A. W., adult; had been out of health some time; complained of languor; slight nausea at times, and occasional wandering pains about the limbs; was seized quite suddenly during the night with acute pain through the right hypochondriac region, darting upwards into the chest, producing considerable difficulty of respiration and some cough. There was also some nausea and considerable fever. For these symptoms I gave Aconite, which produced ready relief. The third day following the attack there appeared on the body and extremities the most general and perfect eruption of erythema nodosum I ever saw; the patches were numerous and extensive, varying in size from that of a dollar to that of a man's hand. I gave him Juglandin, first decimal trituration; made three visits afterwards, on alternate days, when the cure was complete, the eruptions leaving the characteristic greenish-yellow color.

Case IV.—John D., adult; had been somewhat indisposed a week or two; rheumatic pain in right shoulder, extending to the pectoral muscles, producing inability to draw a deep inspiration; had a single thickly set patch of impetigo figurata upon the inside of left leg, between knee and instep, which soon became crusted, discharging a purulent ichorous secretion, that irritated the surrounding skin, producing a wide, inflammatory margin; it was painful and sore, so much so that it was with great difficulty that he could walk. His little daughter had at the same time a considerable number of pustules of the sparse variety of impetiginous eruption upon the arms and hands. I gave him five-drop doses of the dilution of Juglans and three-drop doses of the same to the daughter, to be repeated three times per day. In ten days both were cured.

Case V.—December 15, 1865. Was called to see Flora B., aged eighteen months. Found her as follows: An impetiginous eruption upon her chin, which

had been torn and broken, producing hard crusts, which nearly covered the entire surface; some scattering crusts of the same upon the hands and arms; several large aphthous sores upon the inside of the lips and upon the tongue; bowels very much constipated, altogether making the child very fretful and feverish. The ichorous secretion of the sores had inoculated the mother's breast (she was still nursing the child), producing similar sores around the nipples.

I advised the immediate weaning of the child, and prescribed twenty drops of the first decimal dilution of Juglans in half a glass of water, a teaspoonful every four hours; also a glycerole of the same applied to the eruption, three times per day, the same to be applied to the mother's breast.

December 20. Very much improved; aphthous condition of the mouth all gone; crusts rapidly drying and falling off; bowels had moved naturally and healthy. Continue the same treatment with half the former dose.

December 29. Saw the father of the child this morning; said both mother and child were cured.

CASE VI.—M. M., aged four years; had a patch of herpes circinatus upon the chin about the size of a dollar; had lasted two weeks, and was steadily increasing in size; gave the second decimal dilution of Juglans three times per day in three-drop doses. In one week the crust came off, leaving the surface healthy but somewhat reddened, which soon assumed its natural hue, and in two weeks the cure was perfect.

CASE VII.—In my own case its use has been attended with such satisfactory results that I cannot refrain from giving them. I have been troubled, from a child, with eczema of the hands, steadily aggravated of late years, one attack hardly subsiding before a fresh crop would make its appearance, often passing from the simple to the impetiginous variety, the ichorous and semi-purulent secretion oozing upon exercising; the hands would crust over again, causing the most intolerable itching and soreness, in fact, I have been awakened many a time from sound sleep, to find myself scratching the skin from my hands, only to make a bad matter worse. I have also for the last five years had dyspepsia, with bronchial irritation and cough. Have used Iris versicolor and other remedies, from time to time, without the least benefit; have taken Arsenicum a month at a time, in material doses, with but very slight improvement. During the latter part of the past summer I concluded to try the Juglans in my own case. It was at the commencement of a fresh attack. I took three doses of the mother tincture twice a day, and to my great surprise and gratification, the attack completely aborted; the eruption disappeared in a week. I continued the medicine once a day for three weeks more, when I was equally gratified to find that the bronchial irritation had nearly left me, and that my dyspepsia was cured. I have since remained free from eruption or cough, except occasionally when I am exposed to the night air, when I get a slight return of the bronchial irritability. My appetite and digestion are good, and I can eat anything that is suitable.

CASE VIII.—W. M., aged fourteen, was about the 8th of April attacked with what appeared to be a mild case of eczema of the hands and wrists. I was consulted, and prescribed Juglans, 1st decimal dilution, in five-drop doses, three times a day. I did not see him again until the 14th, when I learned from his mother that she had started three days before to carry him away to school, some forty miles; but when about half way, she found the disease becoming suddenly

and rapidly aggravated, so much so, in fact, that she dare not proceed, but turned about and returned home immediately. She had discontinued the medicine, fearing, as she said, that it was what caused the aggravation, which I could not conscientiously dispute. At the time of my arrival, the second day after their return, as I was out of town, the eruption had become so aggravated that instead of a simple eczema, it had assumed all the characteristics of a fully developed impetigo figurata in its pustular stage. The patches had coalesced, and the eruption had become confluent generally; the pustules were discharging and crusting over, and there was a degree of tension and pain about them that was quite unbearable. After I had looked the case over, the mother wanted to know if I thought I could cure him; said she was afraid I could not, as she had a similar attack when a child, which baffled the skill of some half a dozen physicians. I told her that the remedy he was taking was the right one, and would cure him; if it did not I should be very much disappointed. I immediately took the vial containing it, and made the second dilution from it with water; told him to take the same dose as before, three times a day. I also made a lotion by putting a drachm of the tincture into half a pint of cold water, and applying cloths saturated in it all the while. This treatment was continued without any variation except to gradually diminish the dose for a period of nearly two months, at which time the cure was complete and the medicine suspended.

Dr. Paine (eclectic) says:

The Juglandin, as I have previously remarked, acts as a direct stimulant and tonic to the cutaneous surface; hence, I have used it in chronic eczema, herpes, pemphigus, rupia, acne, impetigo, ecthyma, lichen, prurigo, ichthyosis, molluscum, and all other forms of cutaneous diseases, and have found it to act with more certainty in these affections than any other preparation or single drug that I have used. In chronic herpes and eczema, I have found this remedy, combined with Quinine, almost a specific. My usual method of administering it in these affections is one-sixteenth of a grain of Juglandin and one-half a grain of Sulphate of quinine, four or five times a day. In some cases I have found that a large dose of Juglandin would operate beneficially, while in others a much smaller portion would be all that would be required. In the acute form of cutaneous diseases, the Juglandin appears to be very exciting and stimulating.

In the same paper he says he has known it to cause "irritation and inflammation of the mucous membrane of the bowels, followed by a *peculiar exanthematous eruption, like the flush of scarlatina.*"

Dr. Small reports a cure of "*noli me tangere* on the nose;" and "cases of scrofulous swellings of the glands," cured by Juglans.

JUNIPERUS COMMUNIS.

I have often wondered why our school did not make some use of the Juniper. The *Juniperus sabina*, which is erroneously called "*Sabina*" in our Materia Medica, has a recognized value in our

therapeutics. That species is a native of Europe, but the *Juniperus Virginiana* of this country is considered by botanists as identical with the European species. The *Juniperus communis* and a variety, the *Juniperus procumbens*, possess similar properties, but in a less degree.

If I wished to differentiate between the Juniperus sabina and Juniperus communis, I should say that the former has a greater affinity for the generative organs, while the latter affected in preference the urinary organs. Both, however, have similar properties; both affect the uterus and kidneys. It is not so much a difference of mode of *action* as a difference of *degree of action*. I have known cases of *dysmenorrhœa* and *uterine hœmorrhage* cured by the common Juniper, and I have treated some kidney and bladder difficulties with Sabina. The popularity of pure *gin* in dysmenorrhœa is owing to the effects of the oil of Juniper berries which it contains. In domestic practice, an infusion of Juniper leaves and berries is used successfully in amenorrhœa and dysmenorrhœa, as well as retention, suppression, and other urinary troubles.

In some cases of *dropsy*, a tincture of the berries, or the oil of Juniper, will act on the kidneys favorably after the failure of other medicines.

I would suggest that we use the Juniperus Virginia by the side of the Sabina, in order that we may test their relative value and their similarity. I do not believe their curative effects will differ.

We ought to have provings of the common Juniper, and give it a place in our Materia Medica. (See Allen's Encyclopedia, vol. x, p. 554.)

I would also suggest that the tincture be made from equal parts by weight of the fresh berries and green leaves. The oil of Juniper of commerce is made from the berries alone.

I have an idea that a plant or tree, so far as relates to its medicinal qualities, is a *unit, i.e.*, a tincture of one active portion of it does not represent all the virtues inherent in the plant. Some portions of a plant or tree are inert, but I would mix the other portions and make a tincture of all.

We should then have in that officinal preparation a representation of the whole plant; of all its medical power and qualities.

The tincture of Sabina, of our pharmacies, is made from the

leaves alone. This probably accounts for its preference of action on the uterus. If the berries formed an equal part of the tincture, we would doubtless get its full effects on the urinary organs as well.

German physicians make much use of Juniper in gastric complaints, in abdominal flatulence, colics, and even in some hepatic affections. I *know* that the 3ˣ of Oleum juniperus is useful in certain *coughs*, with scanty urine, loaded with solid matters (urates?).

KINO.

This, according to Wood, is the inspissated juice of the *Pterocarpus marsupium*. It is called, commonly, red-gum. Dr. Blundell, in a paper in the American Hom. Review, vol. iv, says: "The Red-gum bleeds from the tree, dropping like drops of blood upon the soil, closely adjacent to the roots. It is found also within the 'faults' of the timber. The tree, on the west coast of Australia, at least, is of large size, resembling the African oak."

The allopathic school at one time used this powerful astringent largely in the treatment of dysentery and diarrhœa *without* fever. Dr. Blundell remarks:

"That its peculiar virtues in *chronic dysentery* are due to the homœopathic law, I have long felt convinced, and determined to prove the drug to test its value." He got the following symptoms from five drops of the 1ˣ: "Colicky pains towards evening, bearing down with inclinations to stool, without evacuation." The next day the dose was increased and twice repeated; the above symptoms reappeared and continued with increased severity. The colic was only relieved by lying on the belly. The following morning a dry hard evacuation was passed, with a small quantity of blood at its termination. A continuation of the provings developed symptoms much like chronic dysentery.

Of late, allopathists are afraid to use the Kino on account, they say, of its "violent reactions." We can surmise what they mean. My lectures on Gallic acid, Tannin, Geranium, and other "astringents," gave you my ideas of their action. Kino will doubtless help you in severe chronic, and perhaps acute, cases of dysentery, if you graduate the dose properly.

KAOLIN.

The homœopathic preparation of this medicine is made from the purest "pipe-clay" by triturations. Several physicians of our school have used it with alleged success in *croup*, even when supposed to be pseudo-membranous, with gratifying success. It has not been used extensively, however, nor do I think you will find any advantage in substituting this for the old and tried croup remedies.

We have in Hepar sulphur, Spongia and Sanguinaria, medicines which cover nearly all the varieties of croup.

I scarcely need inform you that nearly all cases of simple spasmodic or catarrhal croup run their course in three days (or nights), whether you give any medicine or not. In fact, they do just as well without it. It is only in cases when actual inflammation or exudation has set in that any treatment is necessary. A catarrhal croup rarely goes beyond congestion of the mucous membrane; it becomes spasmodic when the laryngeal nerves are irritated; and pseudo-membranous only when inflammation occurs, in which case inhalations of Bromine, Iodine, and Sanguinaria, according to the specific indications, with their internal administration, is usually successful.

KUMYSS.

Kumyss, or anglicized, Koumiss, is the national beverage of those nomadic tribes which roam over a greater portion of Central Asia, and a portion of Southern and Eastern Russia. The very earliest travellers in those regions mention this drink. A valuable account of it was published as early as July, 1784, by John Grieve, M.D., F.R.S., Edinburgh, late physician in the Russian army. He began as follows:

In an age like the present, when few things in nature seem to have eluded the researches of philosophy—when the communications of learning are as well established as those of commerce—it may appear somewhat surprising that one of the most important productions of milk should still remain, in a great measure, unknown to the most enlightened parts of Europe. The production I mean is the vinous liquor which is procured by fermentation from mare's milk; and it was scarcely to be expected that, after it had escaped the observation of men the most skilled in chemistry, it should be taught us by a horde of Tartars, whose rank in society is not above that of barbarians. Even in Russia itself it was

with difficulty I could learn the particulars of the preparation; and though it had been used for some ages by several tribes of the people who belong to that empire, yet in the year 1781, when I first began to think of employing it in medicine, it was as little known in what may be called Russia proper as it is now in Great Britain. If the academicians of St. Petersburg gave some accounts of it, these accounts have never excited the attention of the physicians of Russia. This neglect is most probably to be ascribed, partly to the obscure relations of travellers, and partly to the pride of system which men of learning are too often apt to indulge in, rejecting as incredible whatever does not coincide with their own preconceived opinions.

For a long time the real nature of Kumyss was not understood, and its method of manufacture a mystery. Some travellers declared it to be intoxicating, and asserted that narcotic herbs were added to the milk from which it was manufactured. In some instances this may have been practiced; but the real Kumyss, as manufactured by the Tartars, is made from the milk of the mare. The Tartars, and many other natives of Asia, depend upon mare's milk for food and drink, to the same extent that Europeans and Americans depend on cow's milk. I take the following extract from a communication to the "New York Medical Record," by Dr. A. Lukanin, of Novgorod, Russia.

The hope to lead the attention of American physicans to this new curative agent has prompted me to write this article. I am most indebted for the material to the lamented Professor of Materia Medica, Dybkovsky, of Kief, and to my late friend, Dr. Anna Kleinmann, of Odessa, Russia, who died of consumption, and was sustained a long time by the most appropriate use of Kumyss.

I shall be very happy if my sketch evokes some interest among American physicians.

Historical Notice.—As is known, the eastern parts of Russia, especially towards the south, consist of endless prairies between the Volga and the Oural, scarcely known even to the civilized parts of Russia, and inhabited by nomad tribes, which know nothing about agriculture, but have large droves of cattle, camels, buffaloes, and especially an immense number of horses. These prairies, or steppes, are covered in summer with savory grass, and the herds graze there, passing slowly from one place to the other, followed by their owners, the nomad tribes, which seldom consist of many members, but oftener of a few families. They pack up their kibitkas, a kind of tent made of skins and felt, which are their dwellings in summer and winter-time, and wander farther, prompted not only by necessity, but also by their wandering spirit. I think that Americans can, better than any other people, realize what a Russian prairie is; it is a sea of waving grass, which is so high that a man in upright position is hidden by it. Seldom a hill is to be met with, never a mountain, and in the midst of it large,

beautiful streams, rolling their lazy waves toward the Black or Caspian seas. Not a single human being is to be met with for several days, and even weeks, by the solitary traveller; not a road, not even a path. In the day the burning heat of an almost tropical sun; in the deliciously fresh and even cold nights, myriads of stars in a sky of deep blue, unknown in other regions. In winter-time nobody excepting the nomad dares to cross the snow-covered desert.

By chance the traveller meets a camp of the Kirghizes; he is quite astonished to see the bright-looking, healthy people, neither too beautiful nor too clean, but happy. He inquires about their mode of life, and they readily tell him all about it, and that their food consists of plenty of meat and milk, especially of the latter, which they prepare in different ways, among others as Kumyss. This production, having been quite unknown to the Russians, it is only natural that it was to this mysterious drink that the health of the nomads was solely ascribed; but their living always in good fresh air, and having work and rest at their own leisure, in reality contributes largely to this result. Be it as it may, the sedentary Russians, settled on the western confines of the steppes, sent their invalids in summer-time to visit their wandering neighbors, and gather strength by drinking Kumyss. They drank freely of it, and *post hoc ergo propter hoc*, spoke of Kumyss as of the agent of their sometimes almost wonderful cures. At last, about twenty-five or thirty years ago, physicians, and lately chemists, grew so far interested in the subject that scientific researches were made, both of clinical and experimental character, and great establishments were founded throughout Russia, where thousands now seek, and often find, health, or at least relief for a given time, from their suffering, as Dr. Stahlberg's cure-house, near St. Petersburg, Russia, where Kumyss is prepared from mare's milk, and others in Middle Russia, and in the Crimea, in some of which cow's milk is used. Such cure-houses are also established now in Germany; so in Austria, near Vienna, in Trautmannsdorf; in Davos, in the Rhenish Alps, in Switzerland, and in many other places.

Wisk, in Bremen, and Schnepp, in Eaux-bonnes, have written about Kumyss. In France it was unknown till 1867.

It has been well-established that the milk of the cow is equal if not superior to mare's milk for the production of Kumyss. The manufacture of Kumyss from cow's milk, however, is much more intricate. Cow's milk requires suitable modification; the elimination of a portion of the casein, the increase of the lactose, and the induction and careful control of a purely vinous fermentation. Cow's milk Kumyss, properly made, is certainly more agreeable to the civilized palate, and the experience of the last ten years has unquestionably demonstrated its high value as a therapeutic agent.

The distinctive character of Kumyss is that of being the most assimilable of nutriments. Every quart bottle contains, approximately, 980 grains of solid respiratory and plastic food, according to Wanklyn, and each of its elements is in a state to promote the digestion of the others by the feeblest stomachs.

Annexed is an analysis by Wanklyn, a London chemist, of a quart bottle of Kumyss.

Water,	10,662	grains.
Alcohol,	192	"
Casein and Albumen,	128	"
Lactose,	582	"
Lactic acid,	130	"
Fat,	36	"
Ash,	90	"
Carbonic acid,	180	"
	12,000	

The 90 grains of Ash contain, approximately, 60 grains of Phosphate of lime, and 30 grains of mixed Chlorides of sodium and potassium.

The physical and chemical characteristics of Kumyss render it an aid upon which the physician can rely with great confidence for the treatment of extreme debility, and all the phases of impending marasmus. Kumyss not only contains a large proportion of Lactic acid, which is a prime constituent of the gastric juice, but holds the casein in that state of vitality which gives it the property of metamorphosing itself and the other constituents of the milk into healthy lymph and blood.

The physiological features of the several constituents of Kumyss may shortly be specified as follows:

The *Lactic acid* activates the digestive powers, diminishes the temperature and the frequency of the pulse, and regulates the mucous secretions. It has an additional specific action in certain diseases, as, for instance, in diabetes.

The *casein*, *albumen*, and *fat* restore the plastic and heat-giving materials of the body, and act as a chemical inspiration, so to speak, to promote assimilation of its associate constituents.

The *lactose* increases the weight of the body and gives heat.

The *Alcohol* produces sleep, diminishes heat, and forms fat.

The *Carbonic acid* allays nausea, calms gastric irritation, augments diuresis, increases the energy of the heart's impulse, and diminishes the frequency of the heart's contractions.

The process of double fermentation in the preparation of Kumyss does nearly all the preliminary work of digestion, that otherwise must be performed by the stomach. There is no other derivative of milk or any other substance, that possesses the same advan-

tages, for, containing all the elements of nutrition, and just in that proportion as necessary to maintain healthy life, it may constitute a sole diet in many cases of dyspepsia or in gastro-intestinal affections.

Dr. Von Chomenkoff, who testifies to the great benefit of Kumyss on himself, states that he has been completely cured of a chronic lung disease and weak power of digestion by its use. He says:

Kumyss is a natural dietetic remedy, suggested, so to say, by nature itself, and therefore preferable, in many respects, to drugs. All those who drink Kumyss agree in saying that they do so with pleasure, that it renders their veins full, their complexion (especially that of ladies) clear and beautiful, that they acquire sprightliness, vivacity and plumpness, and that it is never followed by any unpleasant symptoms.

As a physician and an epicure, I confess I am enthusiastic on the subject of Kumyss. There is no reason why it should not be the national drink of the American people. Beer does not suit our temperament—it is too bilious and stupefying. It does not accord with the genius of the Americo-Anglo-Saxon race.

The following is an extract from a paper on Kumyss which I communicated for the Chicago *Tribune*:—

"I believe the general use of Kumyss would convert our thin, nervous, hyperæsthetic people into a race capable of greater endurance, of plumper physique, and of fresher color. As a medical man, I believe it is almost a nutritive panacea for that class of diseases characterized by failure of nutrition from mal-assimilation. As a race, the people of the United States are subject to dyspepsia. Our children suffer from all forms of mal-nutrition. They do not rally from disease as do the English and German. In hot weather children feed on the bottle, or artificially, do not retain or digest their food, and die off by thousands in all our large cities and towns. In their cases Kumyss is invaluable, not as a medicine, but as a food. It will remain upon the delicate stomach when nothing else will, and will supply the body with nutriment when all other foods fail.

"As an epicure, I look upon Kumyss as far superior to any beverage ever invented. Putting aside all strong spirits as utterly unfit for use in health or disease, except in some instances, Kumyss is far superior to any wine or malt liquor, both in taste and effect. If the reader wishes a new and delicious sensation, let him take a bottle of Kumyss from four to eight weeks old, fresh from the ice-chest. As you allow it to escape through the champagne faucet, into the goblet, mark how it foams like the richest ale and beads like the choicest champagne. It is white as the driven snow, and a faint, delicate and delicious aroma rises, reminding one of the odor of fresh milk, whey, or new-made cheese, combined. Touch it to your lips and you think of the ambrosia of the gods. Drink it, and the sparkle, the effervescence, and the crisp acidulousness shame all the wines of France, or the beer of Germany. It is the delicate combination of milk, buttermilk, cheese and wine, woven together in one exquisite whole.

"It is a matter of wonder that it is not upon the table of every citizen—that it has not usurped the place of wine or beer in every restaurant, and been accorded the place of honor upon the 'wine-list' of all our princely hotels.

"Except in very rare instances, it does not disagree with any person. It never causes the dulness and heaviness of beer, the heat and stimulation of wine, or the after-sense of prostration they so often leave. On the contrary, it cheers and invigorates without leaving any prostration, or any nervousness such as follows the use of tea and coffee.

"I know of no medicine so efficient for sleeplessness, when arising from nervous irritation, debility, or deficient supply of blood in the brain. A gobletful taken at bedtime, and possibly another in the night, causes calm and refreshing sleep, leaving no *malaise*, or headache, or loss of appetite, in the morning.

"It is far more nourishing and more acceptable to a delicate stomach than beef tea or extract of beef. In fact, in sickness or in health, I know of no beverage so well adapted to our comfort as Kumyss. Adults can drink from one to three bottles per day, with none but good effect. I have known many little children, given up to wasting diseases, rapidly recover on the use of one bottle per day. I sincerely hope that this may call the attention of the public to this beneficent food and beverage."

In order to better illustrate the qualities of Kumyss, it may be in place to state a few characteristic cases, as reported by the attending physician, or by the patients themselves:

Dyspepsia or Impaired Nutrition.—Mr. Brooks, aged thirty; occupation, bookkeeper, at 52 South Water Street. Has suffered from dyspepsia for more than two years; much emaciated, and complains of great debility; it is with difficulty he is able to fill his position. Dr. O. C. De Wolf, his attending physician, advised the use of Kumyss. He drank two bottles of Kumyss daily for six weeks. At the end of the *first* week the distress in his stomach had entirely disappeared. His appetite and general health improved daily, and at the end of six weeks he had gained seventeen pounds in weight. His eye is bright, complexion clear and ruddy.

Mr. D. W. Clark (Clark & Edwards, printers, 162 South Clark Street). Dyspeptic; much emaciated and debilitated; stomach very irritable, and, for a week past, has rejected all food. Kumyss was ordered by Dr. P. H. Hale. The stomach readily retained it. The irritability gradually disappeared, and in a few days the patient was enabled to retain solid food without distress. He continued the use of Kumyss at the rate of two bottles daily for about six weeks, and was restored to perfect health. The patient has continued drinking it, more or less, for more than a year, simply because he appreciates its qualities.

Mr. L. C. Bignall, 195 Lake Street. Has suffered from dyspepsia for an indefinite period. After passing through a long course of medication, which failed to relieve his condition, he tried Kumyss. He obtained immediate relief. He drank one or two bottles daily for six weeks, and then considered his digestive powers and general health in excellent condition.

M. J. W. M——, attorney-at-law, 90 Washington Street. Has suffered from dyspepsia for more than six months. Debilitated and haggard. Had repeat-

edly tried medication without relief, and even a trip to the mountains did not improve his condition. He tried Kumyss, and was immediately benefited. After a few days all distress left him. He rested better at night. His complexion became clear, and his eye bright. In four weeks only, he gained more than ten pounds in weight, the former haggard appearance entirely leaving him. Taking a liking to the Kumyss, he continued its use for a long time, and even now, whenever exhausted by professional duties, he restores the normal equilibrium by drinking Kumyss.

Colonel Whitfield, from Washington, special revenue agent. Prostrated by a severe attack of nervous dyspepsia, caused by overwork. Had been confined to his room at the Grand Pacific Hotel, Chicago, for two weeks. For more than a week he suffered intensely from incessant nausea and vomiting. All solid food and drink was immediately rejected. The distress and loss of sleep threw him in a most melancholy condition, having forebodings of an untimely end. Medication had failed to benefit him. A consultation was held, and Health Commissioner De Wolf advised the use of Kumyss. Although the stomach was so irritable that a mouthful of water was immediately rejected, the patient drank a full goblet of the Kumyss, but with some trepidation. Strange as it may seem, it was retained, and the patient soon experienced an agreeable sensation of relief. He took two bottles of Kumyss the first day, and had a good night's rest, the first in more than a week. The Kumyss was only continued a few days, as the colonel was obliged to leave the city; but the stomach had so far recovered itself as to be able to retain more solid food. The colonel was greatly astonished at the immediate benefit derived from it, and thinks it saved his life.

James Balfour, aged fifty-five, 451 West Madison Street, Chicago, has been an invalid for several years. His former and chief complaint being large and painful hæmorrhoidal tumors, which confined him to his bed for several months. The intense pain deprived him of his sleep, and he was in the habit of using morphine injections to obtain relief. The inflammation, pain, and morphine combined, completely shattered his system. His stomach became so irritable as to reject all nourishment, even of the blandest kind. For five days and nights he had been incessantly vomiting, and he himself and his family expected relief only in death. In this condition he was advised to drink Kumyss. Relief from vomiting followed the first draught. He consumed one bottle the first day, and continued using it for two weeks or more. Mr. Balfour considers the effect of Kumyss upon him as bordering upon the miraculous. Instead of dying, in four days he was out walking, and in two weeks was sufficiently strong to follow the occupation of selling nursery stock.

Mrs. Waidner, 300 Chicago Avenue. Digestion poor; debilitated and somewhat emaciated. Dr. P. H. Hale advised Kumyss. Began to improve soon after commencing the Kumyss. The appetite increased and the patient had more animation. The Kumyss was continued for two months at the rate of two bottles per day. Her weight steadily increased, and six months after taking Kumyss she weighed twenty-five pounds more than at any previous time.

Mr. Lee, 62 North Sheldon Street, aged sixty. Has suffered from dyspepsia for several years. Dr. Garrott ordered Kumyss. For several weeks he lived entirely on Kumyss, consuming from two to three bottles per day. The im-

provement soon became manifest. All distress disappeared, and he gained in flesh and vigor. He continued using the Kumyss, more or less, for over six months, and at present considers himself perfectly well.

Mrs. V., aged thirty-five, mother of several children. Sick with some undefined female (?) complaint for more than two years. For six months she has been in bed, not able even to sit up. She has no appetite, and all kinds of food distress her. She never expects to be any better, and consequently is very despondent. Has had no medical advice for the last six months. Her husband having heard of the marvellous qualities of Kumyss persuaded her to try it. On the fifth day after commencing the Kumyss, she sat up in bed for several hours. She continued using the Kumyss, two bottles per day, for seven weeks, improvement steadily taking place. Her husband said, shortly after, that she was more fleshy and looked in better health than at any time during the last ten years. Her appetite was good and she was growing stronger every day. The so-called female (?) complaint had entirely disappeared, and she was expecting to go to housekeeping in a few days. General debility, caused by impaired digestion, was the sole cause of her ailment, and this quickly passed away by the liberal use of Kumyss.

J. M. Underwood, Lake City, Minn. Last night a friend called to get some Kumyss for his wife, who has been sick all winter and is so now that nothing will stay on her stomach. She has tried extract of beef and beef tea, and everything else known to our doctors, but the nausea and distress were not allayed until your Kumyss was tried. It went right to the spot. She relishes it and I am supplying her until more arrives. Another lady, who was expected to die all last summer and this winter, has been taking your Kumyss, and is now so much restored that she is talking of going to housekeeping again. My father-in-law, Dr. Jewell, has lived entirely on Kumyss and a little beef tea during the last six weeks. Thinks he cannot do without it.

Margaret I. Nisbet, M.D., Athens, Georgia. Kumyss is something I have needed and wanted for years. A gastric difficulty rendering all forms of milk and butter unsuitable, and a heart trouble making beef extracts equally improper, I had almost reached that point of decline from which recovery is impossible, when I began the experiment of Kumyss. It is one of the few things as pleasant as it is profitable, and if I could afford it I should keep it on hand as a luxury, apart from its pre-eminent restorative and curative properties.

Consumption. — September, 1875. Miss Allen, aged eighteen. Emaciated (weight only ninety pounds), and so debilitated that she could walk only a few steps. Considerable cough and constant fever. Never has any desire for food. Dr. C. M. Fitch, 522 West Madison Street, her physician, diagnosed incipient consumption. He ordered her to drink one bottle of Kumyss per day. At the end of four weeks her weight had increased to one hundred pounds, and she was able to walk a mile or more without fatigue. The other symptoms of her disease disappeared, and she considered herself sufficiently restored to discontinue the use of Kumyss. Since then she has been feeling perfectly well.

June, 1876. Mrs. Bath, Houghton, Mich. The symptoms of consumption, emaciation, hectic fever, etc., were very clear, and the debility was so great that all desire for food was lost. Her friends had given up all expectation of any improvement in her condition, and she herself seemed resigned to her fate.

Was advised to drink Kumyss. The Kumyss was relished and she immediately began to improve. Fever ceased, sleep and appetite returned, and in a few days she was able to get out of doors. She continued the Kumyss for several months, and continued to improve.

Gastro-intestinal, or Stomach and Bowel Derangements of Children.—February, 1876. Child of Mr. L. R. Smith, Winchester Avenue, aged seven months and a half. Great emaciation; lips pale; skin of a parchment hue, etc. The parents have given up all hope of recovery, expecting the death of the babe within a few hours. Skilful physicians and good nurses have been in attendance, but the child has steadily declined. At the last consultation Dr. Keck suggested Kumyss. The child took the Kumyss *greedily*, consuming one bottle in the first twenty-four hours. The same quantity was taken on the second day, and two bottles on the third. This amount was continued for three months. On the fourth day the improvement began to be perceptible. The skin assumed a more natural color, and the lips became of a pinky appearance. The improvement became more marked from day to day, and at present the babe is a bouncing boy two years of age.

February, 1875. Infant of Mrs. ——, four weeks old. Has been fed on cow's milk from birth. When two weeks old, the bowels became deranged, and the babe has been growing emaciated and weaker from day to day. Neither medication, nor any of the highly recommended infants' foods, succeeded in arresting the diarrhœa, or giving the requisite nourishment to the body. Vomiting set in and continued for several days. Hopeless as the case seemed, Dr. Leonard, the attending physician, decided to try Kumyss. He began by giving the child tablespoonfuls, and was gratified to find it retained by the stomach after all other nourishment had been rejected. The child drank (from an ordinary nursing-bottle) one bottle the first day, and one bottle and a half a day for more than a week after. Its restoration was assured about the tenth day, but it continued the use of the Kumyss for about six weeks. The child is now more than two years of age, strong and healthy.

MR. AREND.

DEAR SIR: I have ordered your Kumyss in a variety of cases of impaired nutrition, and, as a rule, with excellent results. In the gastro-intestinal irritation of teething children it is of the utmost value. I first tested it in a case of this kind two years since. The little patient, a weaned child eight months old, naturally delicate, had become so reduced by continued diarrhœa and vomiting that I greatly feared I should lose her. No food that had been tried seemed at all to agree with her. It would either be vomited immediately or pass undigested. Finally I ordered Kumyss, which acted like a charm. The vomiting and diarrhœa speedily abated, and the little patient rapidly regained flesh and strength. The Kumyss was continued some three months till the weather had become cool. The child's health has since been uniformly good.

This spring, with another child imperfectly developed at birth, and when the mother was unable to nurse it, I found Kumyss the only food that could be tolerated. This child was so feeble that for two or three weeks it seemed barely possible that it could live from one hour to another. The child is now thriving finely, but depending wholly on Kumyss.

I have at this time a third case, a child now ten weeks old, with which the mother's milk had always seemed to disagree. The child cried almost constantly, and worse after nursing. The mother's nipples were so sore that nursing the child was also agony to her. I finally told her to get some Kumyss, and alternate this with the breast, so that she might longer rest from nursing. She soon noticed that after the Kumyss the child was always quiet, while it always had a bad crying-spell after nursing. I then directed the child to be weaned and fed wholly on Kumyss, since which it seems to thrive as well as could be desired.

I, two weeks since, ordered Kumyss in a severe case of pregnant vomiting. I had been giving oxalate of cerium without benefit, when it occurred to me to give the Kumyss in addition to the cerium oxalate. The benefit was immediate. There has been scarcely any vomiting since the patient began the use of the Kumyss. Whether I should be equally as successful with the Kumyss in another similar case I of course do not know, but I should certainly try it. I have frequently ordered Kumyss for adults where nutrition was impaired, and generally, though of course not always, with decided benefit.

Very truly yours,

C. M. FITCH, M.D.

CHICAGO, July 1st, 1877.

Directions for taking Kumyss are hardly necessary. Kumyss is not a medicine. It contains nothing of "materia medica." Its character is that of a food, and it should be considered in that light only. It is a pleasant-tasting and easily digested food, infinitely better suited to a capricious taste and a weak stomach than gruels, beef tea, lemonade, beer, wine, tea or coffee, or the host of dietetics recommended for invalids. Kumyss interferes with no medical treatment, and the invalid who relishes Kumyss cannot find a more grateful or beneficial diet. It should be drank when thirsty or hungry. Infants when fed on it exclusively will need from one to two bottles per day. Adults must suit their appetite and judgment. As it promotes the digestion of other food, it is well to take it with the regular meals; for instance, a gobletful or more at each meal. (There are three gobletfuls in one bottle.) A gobletful taken before retiring quiets the nerves and induces sleep. The usual quantity consumed by adults is from one to two bottles per day. From less than one bottle per day little benefit is to be expected. It may be made *the exclusive diet* in severe cases of dyspepsia or consumption, as is done in the Kumyss cures of Europe. In such cases the quantity consumed depends entirely upon the condition and appetite of the patient, and may reach three to five bottles per day. The benefit from the use of Kumyss ordinarily becomes apparent in a few days by the general improvement of vitality. The use of Kumyss ought to be persisted in for at least six weeks.

To those who desire to use Kumyss it is quite important to understand its nature, its appearance and taste, and the proper mode of keeping it in its most perfect condition. A careful perusal of the following paragraphs is recommended.

Description of Kumyss.—It is bottled in quart champagne bottles, and drawn from the bottle without removing the cork by means of a champagne tap. The tap is indispensable. Kumyss is a sparkling milky fluid, of sweetish, acidulous taste, which reminds one somewhat of sour cream. The three grades of Kumyss are,

new, from two to seven days old; *medium*, from seven to twenty days old, and *old*, from twenty to sixty days or more. The taste of old and new Kumyss is different. New Kumyss is sweeter and contains less carbonic acid and alcohol. The old is tart, and has more alcohol, and so much carbonic acid that it reminds one of soda water.

Kumyss always appears curdled. In new and medium-aged Kumyss the curd seems light, like snowflakes. In old Kumyss the curd becomes granulated and settles to the bottom of the bottle, leaving the fluid above clear. Light shaking mixes all the particles uniformly, so as to run through the tap in a rich and creamy foam.

Kumyss is equally good, new or old. Those who are used to it prefer the old and tart. They say it tastes better, stronger, and is more acceptable to the stomach. Beginners like Kumyss of a medium age. If old Kumyss is too sour to suit a particular taste, a little sugar may be added. In fact the addition of a little sugar and cream to old Kumyss produces a delicious drink and increases its nourishing power. The habitual Kumyss-drinker prefers it to be from four to eight weeks old.

Directions for keeping Kumyss.—It will keep good for several months if kept cool. In fall, winter, and spring it may be kept in a cool cellar. In summer, or when the temperature is steadily above 60 degrees Fahrenheit, it requires to be kept in a refrigerator or in a very cool cellar (a cellar showing less than 60 degrees). The best temperature to keep Kumyss at, and for drinking it, is about 50 degrees, a temperature very easily attained in a cellar or in a refrigerator, as a thermometer will show. At a temperature above 60 degrees Fahrenheit Kumyss rapidly deteriorates. It becomes unpalatably sour. It can be, however, still made useful and palatable by the addition of a little sugar and cream. These precautions apply especially to new and medium Kumyss. Old Kumyss, having passed through fermentation at a low temperature in cool vaults, is ripe, and no longer materially affected by warm temperature.

Keep the bottles containing the Kumyss lying on the side, *also when tapped*, so that the liquid covers cork and tap, and thus prevents the gas from escaping through any possible aperture in cork or in joints of tap.

Preparation of Imitation of Kumyss.—Fill into a strong champagne-bottle good, fresh, unboiled cow's milk to such a height that after the addition of 30 grams (1 oz.) of granulated or powdered sugar, and after corking, there would still be left at least an inch of empty space below the cork. Before corking, add a piece of fresh compressed yeast, about the size of two peas, then cork and tie the cork firmly down. In place of compressed yeast, a teaspoonful of good beer yeast may be taken. The contents of the bottles are well shaken, repeatedly, then the bottles are placed in the cellar, where they are turned up and down a few times during the day. From and after the fifth day the mixture is ready and may be drunk about the twentieth day. It is best to prepare about six bottlefuls at a time, refilling each after it has been emptied and cleaned, so that the treatment, after being begun, may not be interrupted. On opening the bottles the contents are very apt to foam over, hence the bottle should be opened while being held over a plate. It should never be opened where there may be any furniture or dresses about, which might be soiled by spattering.

A good milk wine or Kumyss should have a homogeneous appearance, of the consistence of thin cream, should be effervescent when poured out, of an acidulous, agreeably vinous odor and taste, and should not be full of lumps, or taste like buttermilk.

On first using Kumyss it produces loose bowels, but this effect soon passes off. —"Pharm. Zeit.," No. 25.

LAPIS ALBA.

Dr. Von Grauvogl, whose singularly obscure, brilliant, and unique book you have read, or may read, recommended this remedy for the cure of *cancer*. He claims that he was first led to its use from observing that the waters of certain springs in Germany were beneficial in the cure of *malignant ulcers, cancerous sores, scirrhous tumors*, etc. He found that these waters flowed usually over large beds of gneiss rock, and he came to the conclusion that the waters owed their curative power to the minute particles of this mineral which they held in solution.

He therefore procured some of this *gneiss* and made triturations of it, and prescribed it in cancerous and scirrhous affections. In this he was imitated by several of his colleagues. A condensed report of their success with it will be found in the first volume. It may lead you to use it in such cases, and may finally be the means of relieving some patients suffering from that terrible disease.

The late Dr. Bellows, of Boston, several years before Grauvogl's discovery, recommended and used, with alleged success, a similar species of rock. He believed that goître was caused by the presence of the dissolved rock in the waters of Derbyshire, England, and in the streams among the mountains of Switzerland.

LACHNANTHES.

This remedy was introduced to the profession several years ago, but I do not remember to have seen any clinical reports of its use in disease since the publication of my "New Remedies."

I have not used it myself, for the good reason that I have never been able to procure any. In fact, the first and only vial of the tincture I have ever seen is the one before you, and this was lately sent in to our Materia Medica Museum by one of the Chicago pharmacies.

Judged by the provings, its sphere of action is similar to that of Agaricus, Belladonna, Hyoscyamus, Lachesis, Solanum, and other cerebral stimulants.

It causes a *headache*, which resembles that of Cimicifuga, Sepia, and Belladonna.

One physician claims that he found it beneficial in ameliorating the *delirium* occurring during pneumonia, and which was worse during an exacerbation of the fever at two P.M.

"The *eye symptoms* are peculiar and should attract the attention of the oculist." It has a symptom similar, yet differing from, Gels., Calabar, and Chloral, namely, "On looking at an object for some time, it becomes *dark*." The three remedies above named—also Coca—have the same defect of vision, only "things look *white*." It has another symptom: "A yellow spot before the eyes," which resembles the symptoms found in Phos. ac., Bell., Canth., Dig., Hyos., Sep., Amyl, and a few others.

It has been used in *diphtheria*, and cured a case which had, as an accompanying symptom, "stiff neck—it was drawn to one side." This is a common symptom in diphtheria, ulcerated throat, and after scarlet fever, but I do not believe Lachnanthes would cure every such case, because it is not a drug whose action is penetrating enough to become a similimum to true diphtheria.

There are some mild cases of *cerebro-spinal congestion* in which we might try the Lachnanthes, for, besides the "wry-neck," it has "stiffness of the neck, following pain in the occiput; the stiffness extends over the whole head." This, together with its power of causing cerebral congestion, would make it indicated in the milder types of brain fever, or *meningitis*.

The naturalist Darwin mentions a curious fact, that *white* hogs which eat the roots and leaves *lose their hoofs*, while the *black ones* are unaffected!

Is it possible that it might be useful in falling off of the toe-nails of white men and not of black?

It would be interesting to know the pathological state which causes the hoofs to fall off. Ustilago has this symptom also.

If any physician or student of medicine in the South should observe this toxic effect of the *Red root*, I hope he will take notes and report the facts.

LEPTANDRA VIRGINICA.

If you look in your recent textbooks on botany, you will not find "*Leptandra*," because it has been changed to *Veronica Virginica*. This plant has a high reputation among eclectics, but I have of late years doubted its efficacy in many diseases in which it is recommended.

If the provings made by Burt, and the clinical experience of botanic, eclectic and homœopathic physicians is trustworthy, then the *sphere of action of Leptandra* may be defined as follows:

It first arouses the secretory action of the liver, then the secretory glands of the intestinal canal, and finally the more distant glands of the body.

The eclectic school of medicine, and even the allopathic, claim for Leptandra that it possesses a specific affinity for the liver; that it profoundly modifies its functions in various ways. King says of Leptandra: "It is a cholagogue. It causes the liver to act with great energy, and without active catharsis, and is employed with success in all hepatic affections. . . . . It is indicated by an inactive state of the liver, and all functional diseases of that organ." And of Leptandrin he says: "It is the only known medicine which efficiently stimulates and corrects the hepatic secretions and removes functional derangements of the liver, without debilitating the system by copious alvine evacuations."* Other writers of that school reiterate the same statements, and all eclectic practitioners use it with unhesitating confidence. It is to that school what "blue mass" is to the allopathic, while the Podophyllin is considered to take the place of Calomel. But the wide reputation of Leptandra, in "*all* functional derangements of the liver," is too sweeping, and resembles the assertions of the allopaths, that Mercury is the only remedy in "all hepatic derangements." We are aware that the researches of Inman and Thudichum seem to render it doubtful if Mercury acts directly upon the liver, but the great mass of the allopathic school still use it, and probably will for the next ten generations.

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* Iridin and Euonymin are similar.—HALE.]

The following symptoms are from large doses of the fluid extract:

Dull aching pain in lower part of the right hypochondriac region, near the *gall-bladder*, with dull, aching pain in the umbilicus, and rumbling in the bowels; dull aching in the whole of the liver, the pain extends to the spine, but is worse near the gall-bladder; constant, dull, burning distress in the epigastric and hypochondriac regions; dull, aching distress in the region of the gall-bladder, with frequent chilliness along the spine; profuse, black, undigested stool, followed by great distress in the region of the liver, extending to the spine; the pain is of a hot, aching character, with chilliness along the spine; sharp, cutting pains near the gall-bladder; great burning distress in the back part of the liver, and in the spine; pain in the left shoulder and arm. Jaundice, with clay-colored stools.

These symptoms, from Burt's proving of Leptandra, seem to establish the fact that this medicine does exercise an influence of no doubtful power over the liver and its secretions. The hepatic symptoms are well marked, both the subjective and objective, and the whole experiment goes to prove what I have so often asserted in my writings, viz., that all the remedies *successfully* used by the allopathic school, are used strictly in accordance with the homœopathic law of cure, and being administered under that law, *do* effect cures, notwithstanding the large doses in which they are given—doses which very often produce needless and painful, and sometimes injurious, medicinal aggravations. In regard to the real action of Leptandra on the liver and secretions, I do not propose to hazard any decided opinion, inasmuch as the action of Mercury, even upon that organ, is involved in considerable mystery. The same may be said of such analogous medicines as Iris versicolor and Podophyllum. But I may throw out a few suggestions which may be taken for what they are worth.

"Calomel," says Draper, in his "Physiology," "increases the fluid, but diminishes the solid constituents of the bile." It is my opinion that Podophyllin and Iris versicolor act in a similar manner. Leptandra, on the contrary, *seems* to increase the solid and decrease the fluid constituents of that secretion; or, in other words, Leptandra may have the power of facilitating the proper

elimination of the excrementitious portions of the bile, or an excess of the non-excrementitious portions. It is, at present, believed that the retention of cholesterin in the blood is very injurious. That substance acts somewhat after the manner of urea, namely, as a *direct poison to the nervous centres.* Its non-elimination causes headache, vertigo, languor, depression of spirits, painful sensations in various portions of the body, etc. Now it is highly probable that Leptandra increases, directly, the elimination of this substance, for under its action, when given in proper medicinal doses, the symptoms enumerated above are rapidly dissipated. The retention of other excrementitious constituents of the bile causes various morbid conditions, and the Leptandra, by its peculiar action, seems to be the remedy most likely to be of benefit when we wish to eliminate such substances through the liver. As it does not appear to increase the fluid constituents of the bile as does Podophyllum and Iris versicolor, its apparent tonic effect, even in material doses, may thus be accounted for. Mercury, however, seems to have, in some instances, a similar action with Leptandra. In minute doses, in certain states of the system, it acts as a tonic, *i. e.*, it removes the morbid state by its homœopathic action, and the vital powers resume their normal sway. Some further suggestions relating to the action of Leptandra may not be amiss.

Its *primary* pathogenetic action seems to be that of a stimulant, or irritant *of the hepatic cells.* Chambers states that "Mercury, Nitro-muriatic acid, and Manganese cause an increase of yellow matter in the cells of the liver." Podophyllum may have the same effect; also Leptandra. As a consequence of this primary stimulation and irritation, we have the increased elimination before mentioned, and sometimes acute congestion and inflammation. Leptandra, therefore, is primarily homœopathic to an irritable condition of the liver, in which the discharges are of the peculiar character described under "stool," and the pains and abnormal sensations are similar to those under "liver." The *secondary* effect of Leptandra is *over*-stimulation, or a condition of exhausted irritability, in which the hepatic cells refuse to perform their office (particularly that of eliminating the excrementitious substances from the blood).

The size of the dose, let me remind the reader, will depend on its primary or secondary homœopathicity.

Dr. H. M. Warren, of Jonesville, Mich., reports the following rapid and suggestive cure of a severe case of hepatic disease. Its effects in this case would seem to show that it has a powerful and rapid action on the liver:

Mrs. W., aged 75, was one morning suddenly attacked with the following symptoms, her health up to the previous evening being good: Deliriousness, complete prostration, heat and dryness of the skin, coldness of the extremities; fetid and tardy stools; tongue thickly coated, with a black streak down the centre. I have seldom seen a patient attacked so suddenly, especially with these symptoms, and with such complete prostration. I gave her Rhus and Baptisia—the latter for her fever, which was high, the pulse being quick but weak. The next morning, Friday, I thought she appeared more conscious, and could understand questions put to her. I gave her five grains of Leptandrin 2d, in a tumbler half full of water. I never saw a more rapid recovery. The bowels became natural, tongue cleaned, consciousness and strength returned.

Dr. Neidhard writes me as follows in relation to the action of Leptandra on the liver:

I would draw the attention of my professional brethren to the admirable effect of Leptandra in certain cases of *liver* complaint. Four cases of this kind are now before me, characterized by the following symptoms: The states of the liver are quarterly, periodical, occurring every two or three months; yellow-coated tongue; constant nausea, with vomiting of bile; shooting or aching pains in the region of the liver; loss of appetite; urine of a brownish color, or at any rate very dark; there is also, often, pain in the transverse colon; giddiness in the head. The most characteristic symptom consists in the presence of very dark, almost black, evacuations from the bowels.

It is a stereotyped phrase of eclectic writers that the Leptandra causes "copious, tarlike dejections from the bowels." They teach that when this symptom occurs, after the administration of Leptandra in disease, it is a very favorable symptom, and recovery is confidently predicted. This assumption is based upon the well-known fact, that similar evacuations do often occur during the course of bilious and other fevers, hepatic diseases, etc., and seem to be of a "critical" character, *i. e.*, they relieve the system of certain morbid matters which had caused the malady. I have treated many malarious fevers of a pernicious character, when these tarlike discharges occurred under the homœopathic use of Arsenicum

and Rhus, and when the peculiar evacuations were not due to the medicine, but to the *vis medicatrix naturæ*. I have known them to occur during an attack of supposed portal congestion, when no medicine had been taken. But the pathogenesis of Leptandra proves that those peculiar dark discharges are not always the result of natural disease—in other words, this medicine is not alone an *eliminative* of such morbid matters, but actually causes such evacuations when given to a healthy person. Eclectic writers erroneously teach that when the Leptandra causes black evacuations, it shows that the system was being poisoned with "vitiated bile," or some other morbid matters. It is this belief that has led to the indiscriminate routine and injurious use of this remedy in many diseases. They do not stop to ask themselves the question, whether the tarlike discharges might not be due to the poisonous action of the drug? I have known patients under eclectic treatment to be kept under the action of Leptandra day after day, until the third stage of poisoning—namely, that stage when watery, mucous, and bloody stools occur—because the physician supposed he must continue the administration of the medicine until the black discharges ceased. When they did cease, then the disease was said to "run into dysentery;" but it was the *dysentery of Leptandra*. So much for the blind adherence to prevailing opinion, which is the curse of all medical schools. There are some peculiarities in relation to the symptomatology of the evacuations caused by Leptandra. The *catharsis* caused by it may be divided into four stages:

(1) Discharge of black, thick, tarlike, fetid substances.

(2) Thinner, brownish, often fetid evacuations.

(3) Stool of mixed mucus, flocculent, and watery matters, with yellow bile or blood.

(4) Mucous, bloody stool, mixed with shredlike substances; often pure blood is discharged.

Now, to prescribe a drug successfully, we should know the different stages of its pathogenetic action. This is just as important as to know the stages of disease. The *catharsis* of Podophyllum differs materially from that of Leptandra, and although it causes some of the varieties of stool, they occur in a different order. If we are called upon to prescribe for a diarrhœa, we should investi-

gate its history; if that history corresponds in *order* and *nature* with the Leptandra disease, then that drug is the specific remedy. In the treatment of a dysentery the same rule holds good; dysentery occurs in the fourth stage of Leptandra poisoning, while it occurs in the second stage of Podophyllum intestinal irritation. With some drugs, scanty, bloody, and mucous stools occur as a primary symptom, as in cases where the rectum is the seat of inflammation.

Dr. P. P. Wells, of New York, has lately called the attention of the profession to the *characteristic* symptoms of drugs; those symptoms which make it differ from all other drugs. Thus, there are many remedies for "*black stools*," but not all will remove that condition; the *collateral* symptoms must correspond. This subject will be noticed in another place.

In the pathogenesis of Leptandra, it should not escape the notice of the physician, that the evacuations *per anum* are accompanied by some peculiar symptoms: the pains in the intestines usually occur *after stool;* in the Podophyllum diarrhœa they occur *before*, while in the diarrhœa of Mercury, and many others, the pain is severe *during* the stool. It will also be noticed that the evacuations are not followed by *tenesmus*. The provings given do not mention it, nor do I find it mentioned in any article referring to its action. In practice I have not found it useful when there was marked tenesmus attending the disease. Such remedies as Podophyllum, Aloes, and Mercurius are more applicable.

I am inclined to believe that Leptandra does not have any direct specific effect upon the rectum. Its action on the liver and portal system undoubtedly causes it to affect the rectum and hæmorrhoidal vessels, but this action is indirect. If we carefully study the symptoms of Leptandra, after the method proposed by Dr. P. P. Wells, we shall find it a drug possessing a distinct individuality, as much as any other drug in our Materia Medica.

In *acute diarrhœa*, we shall find this medicine often indicated, and it will prove a valuable specific when administered for the pathological conditions in which it is indicated; those, and the symptoms, are well shown by the provings.

In *chronic diarrhœa*, this drug is even more reliable for the general condition, which is shown by the following extracts from

my lecture on Leptandra, delivered before the class of Hahnemann Medical College, in the winter of 1864:

The three principal varieties of chronic diarrhœa, in which Leptandra will be found useful, are:

(*a*) From chronic acute inflammation or irritation of the mucous membrane.

(*b*) Dependent on hepatic derangement.

(*c*) Diarrhœa of debility.

Some of the indications for Leptandra in the first-named variety I have already given, but I will here call your attention to one form of this affection, which bears the common name of "*camp diarrhœa.*" This disease is usually contracted in camp, where the soldiers are ill-protected from atmospheric changes, and are exposed to cold, dampness, and fetid exhalations from refuse matter, decaying vegetation, etc. These, together with improperly cooked food, and bad water, are the principal causes of this malady. Its onset is sometimes gradual, lasting for days and weeks before the surgeon's attention is called to it by the patient; but it often attacks its victims suddenly, and assumes the character of a cholera morbus or acute enteritis. It is one of the most intractable diseases with which our army had to contend. Under allopathic treatment it is almost incurable, and sometimes resists all medication, so long as the man remains in damp or barracks, exposed to the same influence which caused it, and obliged to subsist upon the usual hospital diet. In the acute stages the following treatment will be found the most applicable: If it is evidently caused by a cold or exposure to dampness, Dulcamara, Aconite, or Pulsatilla will be found most efficacious. When caused by bad diet, and improper food or water, Pulsatilla or Podophyllum will be most useful. If hepatic derangement is evidently present, Mercurius, Podophyllum, Leptandra, or Iris versicolor, will be indicated. If the attack is choleraic in its character, Arsenicum, Veratrum album, or Euphorbia corollata, and perhaps Aconite, should be selected. But when it assumes a chronic character, and persists in spite of altered diet, change of location, etc., then Leptandra will be found an invaluable remedy. In many cases its persevering use will alone effect a cure, although there are cases in which we may be obliged to resort to the auxiliary aid of Phosphoric acid, Nitric acid, Arsenicum, Sulphur, or Mercurius corrosivus.

It is in most cases absolutely necessary that the patient (the subject of camp diarrhœa) should be removed from camp, or barracks, as soon as possible, and transferred to some healthy locality. For obvious reasons, a return to the patient's home is to be preferred. Here his military dress should be changed for his former civilian's apparel, and his diet should consist of plain, nutritious, easily assimilable substances. My experience has been that patients do the best upon a milk diet, plain bread and milk being the best form of its use. In addition, he should have a certain amonnt of good fresh beef, mutton, or game, every day. Taking the hint from the practice of an eminent Russian military surgeon, who successfully adopted the treatment in the great military hospitals, I have advised the use of raw, or nearly raw, beef, and in most instances with the most satisfactory results. Tender lean steak should be selected and chopped very fine; a very small quantity of salt may be added if the patient insists. Of this an adult may eat one or two ounces three times a day with his bowl of bread and milk. Potatoes, salted meats, warm bread, raw fruit, pastry, coffee, preserves, and

liquors, should be prohibited. Moderate exercise will be of advantage; too much, injurious. If the chronic diarrhœa depends for its continuance on debility, and resembles the colliquative diarrhœa of phthisis, accompanied by hectic fever and colliquative sweats, the Leptandra is still useful, but should be given in alternation with Phosphorus, Arsenicum, China, or Nitric acid. The two latter are especially indicated if a lientery is developed and the food passes the bowels unchanged, or in a state of putrefactive fermentation.

In some cases such is the debility and relaxation of the mucous membrane that the serous and even fibrous parts of the blood escape, attended sometimes with more or less of the red coloring matter. An increased degree of the same affection constitutes passive hæmorrhage. It is not unfrequently associated with a watery state of the blood, which becomes incapable of sustaining a due energy in the extreme vessels. In such conditions Leptandra is still useful, but should be aided by those remedies which are capable of bringing back the blood to a normal condition. First in importance stands Iron. The preparation I prefer is the Phosphate, given in the form of syrup or superphosphate of Iron, thirty drops after each meal, or a few grains of the first decimal trituration of the Pyro-phosphate. Next in value are Hydrastin, Helonin, Muriatic acid, and sometimes Nux vomica. The Citrate of iron and strychnine is often one of the most efficient remedies for chronic diarrhœa, when we have two conditions, namely, an impoverished state of the blood and an atonic state of the muscular tissues of the intestines. When these states obtain, we usually find alternate constipation and diarrhœa, deficient digestion, accumulations of flatulence, and hæmorrhoids.

Chronic ulceration of the intestines often occurs during the course of a chronic diarrhœa. Dr. Chambers says: "There is no disorder in which emaciation is so marked a feature throughout its whole course as chronic ulceration of the small intestines. Ulcerations of the cœcum and colon, tubercular or not, produce as much, nay, often more, diarrhœa; but they are not by any means so distinguished in their power of reducing the patient. In this lesion of the ilia, even the parts which are not the actual seat of disease seem incapacitated for absorbing nutriment, and the victuals pass through the alimentary canal in the same state as when they left the stomach, except being made putrid by chemical decomposition. All the stages of digestion are equally suspended."

These lesions are more common during infantine life, and thousands of children are yearly carried off by this malady in every large city. In this affection Arsenicum, Mercurius corrosivus, Sulphur, Nitric acid, and Phytolacca are indicated. The Leptandrin has also been of use in my hands, when, with the usual symptoms, there was present a jaundiced hue of the skin, sallow complexion, pain in the region of the liver, lack of bile in the evacuations, and great debility. In such a condition I would advise you to use, for adults, the first decimal trituration; for children, the third trituration.

When the ulceration is tubercular you will have to resort to a different class of remedies, prominent among which I would advise the Hypophosphite of lime (Calcis hypophosphis), which has all the curative properties of Calcarea carbonica, together with the recuperative qualities of Phosphorus. The second or third decimal trituration will prove the most satisfactory. Leptandra may be called for, even in this disease, if we find disorder of the liver complicating the case.

I believe it increases the absorbent action of the intestinal mucous membranes, and thus prevents the excessive emaciation. In respect to the action of Leptandra on the mucous membranes of the intestine, Dr. Coe gives a case which is quite interesting. He says: "No remedy with which we are acquainted is more to be relied upon in chronic affections of the mucous surfaces. Its value in this respect is peculiarly apparent in chronic dysentery and diarrhœa and other diseases of the bowels. When false membranous formations have occurred in the smaller intestines, produced by the gradual exudation of plastic lymph, the Leptandra may be relied upon for their removal with great confidence. . . . . We have also used it with great success in the cure of constipation and piles. We recently treated a case of the latter complaint, accompanied with frequent hæmorrhage from the rectum, of twelve years' standing. A short time after commencing its use, the patient discharged considerable quantities of false membrane, in shreds and patches, and a number of pieces several inches in length, forming complete tubes. The evacuation of this matter was attended with amelioration of all the symptoms, and at the present time the patient declares himself well. The bowels are regular, appetite good, the hæmorrhage has ceased, and the distressing pain so long experienced beneath the sacrum, entirely gone."

This is quite an important clinical fact, and although the cases were treated with massive doses (two to four grains twice or thrice a day), we cannot doubt that the remedy was homœopathic to the disease mentioned.

In Wood's "Practice," article Chronic Enteritis, we find that "occasionally false membranes are discharged, and, in some rare instances, tubes of considerable length, obviously the result of a plastic inflammation, throwing out coagulable lymph upon the surface of the mucous membrane."

Dr. Cumming, of Edinburgh, has given an account of a peculiar variety of pseudo-membranous inflammation of the bowels (quoted by Wood). In this variety Dr. Simpson used Arsenic, a remedy homœopathic to the disease; and Dr. Cumming used tar and "electro-galvanism" successfully.

Believing, as I do, that all medicinal remedies cure only under the law of *similia*, it seems highly probable to me that Leptandra, in the case given by Dr. Coe, caused the expulsion of the membrane, and effected the cure by virtue of its power to cause a similar pathological state.

Chronic dysentery is often associated with chronic enteritis, and it is not always easy to determine how far the two portions of the bowels are severally involved in the inflammation, nor is the decision a matter of much importance. Chronic diarrhœa and dys-

entery are very nearly allied in their anatomical character, and we often find cases where the symptoms of both maladies are intimately blended. But chronic dysentery, when not thus combined, is distinguished from chronic diarrhœa by the frequency and comparatively small quantities of the evacuations, their character, and the tenesmus with which they are attended. The greater number of the stools consist chiefly of mucus, sometimes mixed with puslike matter or blood. Occasionally, however, feculent or bilious matter is mixed with the proper dysenteric discharge. When the disease occupies the rectum and lower portions of the colon, the frequent discharge is often consistent, and instead of being uniformly mixed with mucus, is either irregularly pervaded by it in layers or streaks, or enveloped in a thick coating of it, derived from the surface of the bowel with which the fæces lay in contact. There is usually more or less tormina and tenderness on pressure; the pulse, skin, and appetite are affected as in chronic diarrhœa, and there is nearly the same emaciation. Chronic dysentery is seldom an original disease; but when it occurs is almost always in consequence of an acute attack. "Camp dysentery," and even "camp diarrhœa," may run into a chronic dysentery. In this disease we have in Leptandra a valuable and efficient remedy, but it is more applicable to those cases in which a chronic enteritis complicates the disorder.

In *cholera infantum* it has proved a very useful remedy. Dr. King (eclectic) says:

> In cholera infantum, a disease which sometimes sets at defiance all the skill of the physician, I have met with excellent success by the following combination: Leptandra, six grains; Quinia, three grains; Camphor, one and one-half grains; Ipecacuanha, three-fourths of a grain, mixed and divided into twelve powders, of which one may be given every two or three hours, and its use continued thus for several days. Its action at first is to increase the alvine passages, and apparently augment the disease; but in a few days the character of the evacuations change, become more and more normal, as well as more regular in their appearance; after which one or two powders per day for a week will render the cure permanent.

I have quoted the above to show that this mixture, absurd as it is, really cured the disease homœopathically.

Leptandra, the main ingredient, is eminently homœopathic to the disease in most cases, as the provings show.

Quinia, for which we substitute China, is indicated by the general condition (prostration from loss of fluids), and by the special symptom (copious, dark, or light watery stool).

Ipecac. is one of our best remedies when there occurs vomiting with the diarrhœa; and Camphor, as shown by Hahnemann, is quite homœopathic to choleraic symptoms with considerable prostration. By the use of Leptandra, third trituration; China, second dilution; and Ipecac., first or second, with Camphor, one-tenth, as an intercurrent remedy, the homœopathist can cure his patient, without the danger of doing the injury to the organism, especially in cases of children, that is apt to occur from such massive doses as is advised by King, who admits that the disease is apt to be aggravated at first by the medicines.

Dr. B. L. Hill, when an eclectic, wrote as follows concerning the action of Leptandra in dysentery:

In the epidemic dysentery which has prevailed for the last two seasons (1854–55) in many parts of our country, it has been of great service. It was usually given with the best success after evacuating the bowels freely, with a combination of Podophyllin and Leptandra, or Rhubarb. For this purpose give from one-half of a grain to a grain every hour, gradually lengthening the intervals as the discharges become darker. Though it may not be applicable in all cases of dysentery, it is doubtless one of the most useful articles in this dangerous disease.

The epidemic referred to was of an adynamic character, quickly prostrating the patient, and often ran into a typhoid condition. For the same epidemic Dr. Hill would now advise and use, with as good results, minute doses of Leptandra, Podophyllum, Arsenicum, and Baptisia. It may be remarked here that Podophyllum is indicated for a much higher grade of inflammation and irritation of the bowels than Leptandra. The following was Dr. Hill's estimate of the action of Leptandrin:

It is not strictly cathartic. It is aperient, alterative, and tonic. In cases of children affected with summer complaint, where there is evidently a lack of the proper biliary secretions, but when, owing to the irritated condition of the bowels, the ordinary remedies for arousing the liver are inadmissible, this article seems to be the very thing needed. While it acts freely upon the liver, instead of purging, it seems to change the discharges from the light and watery, or slimy condition, to a darkened and apparently bilious state, rendering them more and more consistent, until they become perfectly natural, without having been arrested entirely, or at any time aggravated. At the same time it seems to act as a tonic, restoring the tone of the stomach, and increasing the strength and activity of digestion.

Dr. Hill, the homœopathist, valued the Leptandra quite as highly as did Dr. Hill, the eclectic, but he accounted for its action in a more rational manner. As the latter, he gave from one-fourth to one grain every hour or two in acute cases, or one to two grains three times a day in chronic cases; as the former, he also finds $\frac{1}{10}$ or $\frac{1}{100}$ of a grain equally serviceable. In those severe cases of disease which clearly resemble the primary symptoms of poisoning with the fresh root of Leptandra, the 30th, if prepared from a good tincture, would doubtless act curatively.

Dr. William Fry, of New York, reports the following case of intestinal disease treated successfully with this remedy:

My first trial with this remedy was followed by the most prompt and satisfactory results. It was a case of *dysentery* of nearly a month's standing, having been brought on after a sudden change of climate. The following were the most characteristic symptoms of the case at the time the Leptandra was prescribed: mental suffering; dizziness and headache; chills, followed by fever; pain and uneasiness in the bowels; nausea, and a constant profuse flow of saliva from the mouth during the chill; great thirst, but inability to keep any food or drink upon the stomach; constant desire to urinate during the chill; urine high-colored, and passed in small quantities; soreness of the rectum; hæmorrhoids; painful dragging and stinging pains in the rectum; bowels bound and alternated every three or four days by a setting-in of diarrhœa, the passages consisting of fecal matter resembling raw or boiled beef after having been pounded fine, with an admixture of mucus and an intolerable fetid smell. The desire to stool was in the morning, and continued about an hour, during which time there were four or five passages, followed by tenesmus of the rectum and a feeling as if something was passing out. These are some of the most prominent symptoms of the case, and I cured it with two doses of the Leptandra—one powder of the first centesimal trituration in the evening and another in the morning, after having failed to get any effects from such remedies as Arsenicum, Colocynth, Carbo veg., Mercurius, etc. I got the best results from this remedy in the lower forms of preparation.

Dr. G. W. Barnes, now of San Diego, Cal., communicates the following cases:

Case I.—During the progress of a tedious case of post-scarlatinal follicular entero-colitis, associated with a condition of general anasarca, occurring in a little boy of six years, the details of which I will not trouble you with, there occurred a condition of the alvine evacuations corresponding very beautifully with your proving of Leptandra. The stools, three or four a day, were profuse, dark-brown, almost black, of a mushy consistence, and highly offensive odor. There was difficulty in retaining the stool; he must go immediately. There was sharp pain preceding the stool and relief afterwards, but increased weakness. He usually went to sleep soon after stool. Other remedies were required to complete the

cure; but Leptandra, 3d trituration, very promptly changed the stool to a normal appearance and frequency, and produced a satisfactory amelioration generally.

CASE II.—Captain H——, Ohio National Guards, had suffered nearly three months with camp diarrhœa, and had been for the greater part of that time in hospital. During a tedious journey from Washington his case became aggravated, and on his arrival at home he was hardly able to stand upon his feet. He was emaciated, his features haggard and jaundiced; his stools, previously mixed with undigested food, were now muco-purulent and bloody, quite frequent and attended with some tenesmus and cutting pains low down in the bowels. Cold water taken internally produced a sense of weight at the stomach, cutting in the bowels, and a disposition to stool. There was a state bordering on ulceration, and it was the opinion of his hospital surgeon that that condition existed.

Some amelioration followed the administration of Mercurius cor., 6th and 30th, but under the influence of Leptandra, 3d trituration, improvement was prompt and steady, and in two weeks his stools were natural in quality and frequency, and he was soon well.

You must not confound the black, tarry, fetid stools of the Leptandra diseases with *melœna*, a disease in which black, disorganized *blood* is passed by the bowels—a condition in which I doubt the applicability of Leptandra, but would prefer Sulphuric or Nitric acid, or Hamamelis.

It has been recommended as a remedy in *dropsy*. King says, "It exerts a powerful influence upon the absorbent system, and in combination with Cream of tartar, has been successfully used in obstinate cases of dropsy."

If Leptandra is homœopathic to any variety of dropsy, it is probably that dependent on *disease of the liver*. In order to test its value in dropsy, or indeed any disease, it should be given alone. To combine medicines is to lose all data concerning the real action of any single agent.

It is doubtful if Leptandra exercises any specific action on the functions of the kidneys, yet a medicine may be useful in dropsy without being a diuretic. It may act curatively by a certain general restorative power. Thus, China, Iron, Helonias, etc., may remove dropsies, by bringing the organism up to a normal condition. Any cause which obstructs the circulation in the portal system of veins will induce dropsy. Chronic tumefaction of the liver, and organic diseases of that organ; also inflammation of the

portal vein, are the principal causes of the varieties of hepatic dropsy.

You may find Leptandra useful in *headaches.*

With the knowledge we now possess of the action of this medicine, especially on the liver, we can very properly decide its headache to be the so-called "bilious headache." It somewhat resembles the cephalalgia caused by Nux and Bryonia. A bilious headache is usually accompanied by constipation, furred tongue, bitter taste, indigestion, yellow urine, languor, and depression of spirits. A free discharge from the bowels of dark-brown, or greenish, feculent matter, usually dissipates the pain. Such headaches are relieved, and even cured, by the use of Leptandrin, second or third trituration.

Aided by Nux vomica, it is one of our most efficient remedies against the peculiar, stupid, sleepy condition which attends portal congestion—"biliousness"—a state which often occurs during the summer months, and is often precursory of a bilious fever.

As a fever medicine, its only use is as an intercurrent remedy, or for the purpose of removing the *cause* of the fever.

Coe remarks that when the Leptandra is given in disease, and the patient is fairly brought under its constitutional influence, "the skin, which was before hot, dry, and constricted, becomes soft, moist, and flexible; expectoration becomes easy, the *arterial excitement is lessened,* and the patient, before restless, wakeful, and delirious, becomes calm, rational, and inclined to sleep." He considers it a valuable remedy in typhoid fevers, and in his opinion King, Jones, Morrow, and others concur. Some homœopathic practitioners, as Hill, Gatchell, and many of my correspondents, place the same high estimate upon its curative powers in typhoid states, when there is present *great prostration, stupor, heat, and dryness of the skin; calor mordax, or coldness of the extremities; dark, fetid, tarry, or watery stools, mixed with bloody mucus; and an icterode condition.*

In *intermittent fever* it is a favorite and much-used medicine by nearly all Western physicians of both schools, who combine it with Quinine. They assert that it renders the action of Quinine more certain, and prevents the liability to a return of the disease, at least for the season, and is useful in periodic diseases generally,

of an obstinate character, in which Quinine produces little or no result. In my experience, which at one time was very large in diseases of the character referred to, the Leptandra did really act in a very beneficial manner. My method was to use it in alternation with Quinine, China, Nux vomica, or any other medicine indicated, and always in accordance with what I considered to be its homœopathic applicability. I do not consider that it has any real antiperiodic power, as some drugs undoubtedly have, but it removes conditions of the liver which often tend to keep up a continuance of intermittent maladies. I usually gave it for the following symptoms: Considerable prostration, loss of appetite, heavily coated brown tongue, bitter taste in the mouth, constipation, or diarrhœa, with dark, fetid stools, jaundice, yellow, saturated urine.

In *bilious fevers*, I have given it for nearly the same symptoms, using Leptandrin, second or third decimal trituration.

In *infantile remittent*, I have had some excellent results from its use, administering the second or third dilution of the tincture, or the third and fourth trituration, as seemed most proper.

I do not see why it may not prove a good remedy in *yellow fever*. It corresponds to some of the symptoms. It may be good for the premonitory symptoms, or some of the sequelæ.

LILIUM TIGRINUM.

The Tiger-spotted Lily, so common in gardens, has lately risen from its position as an ornamental plant, cultivated only for its flowers, to a high rank as a therapeutic agent. The honor of introducing this remedy into our Materia Medica belongs to Dr. W. E. Payne, of Bath, Maine. He was assisted in making the provings, which go to make up the pathogenesis, by such eminent men as Drs. C. Dunham, L. M. Kenyon, and Lilienthal, aided by many other physicians, medical students, men and women.

Dr. Payne's elaborate and exhaustive *résumé* of all the provings appeared first in the Transactions of the New York State Homœopathic Medical Society, 1871. This will be found transferred into the first volume of this work (Materia Medica).

Dr. Payne, after giving the botanical description of the plant, says:

The reported death of a child in convulsions, by eating the pollen of the flower, suggested the idea of proving the drug, and the hope of finding in it additional means of combating the sometimes formidable convulsions arising from acute and chronic meningeal irritation, prompted the execution of the work. Though the hope is not realized in the proving, yet the promise in a class of diseases which, from their multiplicity, have become the bane of female happiness, is sufficiently strong to inspire confident expectations that this drug will henceforth hold an important place in the homœopathic Materia Medica.

The *sphere of action* of the Lilium is clear and unmistakable. The symptoms all point to the *reproductive organs* as the starting-point of its pathogenetic effects. Study first its *direct* effect on the ovaries, the uterus, and the homologous organs in the male. In *all* it causes a series of pathological conditions, ranging all the way from simple *functional irritation* up to *subacute inflammation*, and, finally, nearly all the uterine *displacements*.

But the action of the drug does not stop here. Through its action on the reflex nervous system, which it renders excessively sensitive, a host of sympathetic symptoms occur. Nearly every organ and tissue of the body, even the mental sphere, become involved in the general and widespread irritation.

Select almost any symptom at random from the pathogenesis, and you will be able to trace it back to its origin in the generative organs.

There is such a thing as a *pathological keynote* to every drug, if its pathogenesis is complete, just as there are *symptomatic keynotes* to all medicines.

I propose to point out to you both kinds of keynotes in the pathogenesis of Lilium, and at the same time give you such clinical experience and therapeutic deductions as will be of service to you in practice.

The Lilium has been used very extensively since the first appearance of any provings of it, and while many of our best practitioners are very enthusiastic in its praise, others assert that it has disappointed them. This discrepancy may be explained in several ways: First. All new remedies, with vivid and promising pathogeneses, lead us to expect too much from them.

We prescribe them, expecting to see prompt and brilliant results; such hoped-for results do not come as soon as we desire and we are disappointed. Second. It is claimed by Dr. Dunham, who has studied the remedy critically, that neither its curative nor pathogenetic effects appear promptly as a rule. "Sometimes," he says, "they do not appear for days or weeks after it is administered." If this be the case, it will account for its many failures. Few physicians are content to wait many days for the evidences of the action of any remedy, except in obstinate chronic cases. They therefore soon change the medicine, and the new one either antidotes the Lilium or gets the credit of the Lilium cure.

The *dose* of this remedy is as varied as the experience or the whims of physicians. It has been used in every potency and curative effects claimed for each. In the hands of eclectic physicians the infusion of the flowers and leaves is credited with just as brilliant cures as the 1^{m} in the hands of our highest dilutionist!

A study of the provings does not render it certain which organ, the uterus or ovary, is first affected. As the ovary is the real centre of the reproductive organs, it is probable that it is really the organ first affected.

Both ovaries are involved in the Lilium irritation—the left in one prover, the right in others, and both together in several provers.

It is homœopathic to *ovarian irritation*, with its consequent effects—frequent and profuse menses. In this respect it resembles Platina, Calcarea, and Sabina.

It is indicated in *ovarian congestion*, which sometimes retards menstruation and makes the flow scanty. In this it resembles Sepia, Conium, Lachesis, and Pulsatilla.

Subacute and chronic ovaritis are amenable to its curative action. It rivals Apis mel., Belladonna, and Cantharis, which correspond, however, to the intenser grades of ovaritis.

It is probable that a judicious use of ovarian remedies might prevent many cases of ovarian tumor. Of all these remedies, Apis has the characteristic symptom which is common in women threatened with such tumors, namely, *sudden fainting without any apparent cause.* Next in order is Lilium, which, if reports can be relied on, has cured many incipient tumors. I am inclined to the belief, however, that these tumors were *simple enlargements of*

the ovary, benign in character, the result of congestions and irritations. I do not believe any medicine is capable of resolving an ovarian cyst, or an ovary enlarged by the deposit of solid matters. In simple hypertrophy Lilium may be curative.

If any remedy known to us possesses the power of removing by absorption a solid ovarian tumor, that remedy is the Iodide of barium.

In *neuralgia* of the ovaries I have often found Lilium useful. It is indicated for burning, stinging, and darting pains, but especially when attended *by cutting pains in the mammæ*, one or both.

Lilium is not particularly indicated in *dysmenorrhœa*, by its direct menstrual symptoms. If it is indicated at all, it is probably in the neuralgic, or congestive variety, but I think it will never be found as useful as Viburnum, Xanthoxyllum, or Caulophyllum. In painful menstruation from uterine displacements it will probably be found most useful, for it corresponds to nearly all.

Lilium has this symptom: "menses cease to flow when she ceased walking." This is analogous to the effect of Cactus and Causticum. I have a patient whose menses *cease to flow when she walks*, and flow only when lying down, just the opposite of Lilium.

The uterine symptoms of Lilium are of a character closely similar to its ovarian; the pathological conditions are similar. Gynæcologists teach that all uterine displacements, flexions, etc., are caused by congestions, inflammations, and enlargements of that organ. Of these causes, *congestion* is undoubtedly the most potent. This is the reason that Lilium possesses the power (as demonstrated by actual examinations during the provings) of causing *anteflexion and version*. It is reasonable to expect that a drug capable of causing anteversion, would be capable, if used long enough in provers of various ages and conditions, of causing the other *flexions* of the uterus. Repeated or intense congestion, occurring in a previously healthy woman, with uterus *in situ*, would cause anteversion, rather than retroversion. But if the prover had already a prolapsus, or if she had borne many children, and the womb was low, she would get *retroversion* from the same amount of congestion.

The assertion that displacements are caused by relaxations of the uterine ligaments, is not founded on pathological facts. The

relaxation is probably secondary, and does not belong to Lilium effects. Such medicines as Helonias, Aletris, or Ferrum, meet such a condition specifically.

It is possible, then, if the symptoms correspond, to remove a flexion or version of the uterus by the *aid* of Lilium. I say by the *aid*, for I do not believe any medicine can restore a *dislocated* uterus to its normal position, unless we have the aid of position, or some artificial support, for a sufficient time. We may with Lilium alone ward off an impending displacement or flexion, or cure a very slight one, but not one that is fixed or has lasted long.

Neuralgia of the uterus is closely imitated in the provings of Lilium, and I have often cured some severe cases. It may be useful in those conditions now known as *cervicitis, mucous cervicitis, endo-cervicitis*, and *mucous metritis.*

The *leucorrhœa* of Lilium is peculiar in character, being acrid and excoriating, causing a rash on the labia, and an intense irritation of the whole vaginal canal, even to *vaginitis.* As this kind of leucorrhœa is indicative of mucous inflammation, it follows that Lilium is indicated in all the inflammations of the generative canal, from the mouth of the vagina to the end of the Fallopian tubes.

Its primary effect in both sexes is to cause increase of sexual desire, but I do not think this so much an effect on the mental sphere, as it is a result of the local irritation of the vagina, vulva, and other tissues near the clitoris. The sexual desire is controlled by the will, and by keeping busy; and it is notable that the *desire* to *urinate* caused by Lilium is controlled in the same way.

The abdominal and intestinal symptoms are of a double character; a portion of them depend upon the specific irritation of the drug upon mucous surfaces; the other portion on its uterine symptoms. This will be seen readily by any physician conversant with the symptoms of uterine disorders.

The symptoms of the stomach, appetite, and renal organs may be classed in the same category. It will relieve *morning nausea of pregnant women*, or the *nausea from uterine irritation.* It corresponds with some of those longings and aversions so common in women during pregnancy, or suffering from ovarian and uterine disorders. Many of the *head symptoms* are reflex, but it may

prove curative in *sick headache*, in *congestive headache*, and some neuralgic cases. The congestive headaches simulate those of young girls before menstruation has set in.

The action of Lilium on the mental and emotive sphere is purely reflex, and from the irritation of the generative organs.

It is homœopathic to *hysteria*, to those strange and abnormal mental manifestations which occur in women with uterine disorder, or men who have abused their sexual organs by excesses, etc.

I make no doubt it will prove useful in cases of *insanity* when caused by disordered conditions of the genital apparatus.

The mental symptoms are similar in some respects to those of Ignatia, Crocus, Platinum, and Cimicifuga.

The *eye symptoms* would imply that the oculist may find it a valuable remedy in some functional disorders of vision. Dr. Bell says that in one form it improved a *hypermetropia* after aggravating it. Dr. Woodyatt suggests that it was a case of *astigmatism* with a weakened power of accommodation. He thinks it may have aggravated the weakness, and thus relieved it homœopathically. Its action on the eye reminds one of Gelseminum and Cimicifuga.

The Lilium may prove an important remedy in *diseases of the heart*. It appears to have a decidedly *depressing* action on the cardiac nerves, by which the heart's working power is lessened. The blood is not impelled by it with sufficient force to fill the arteries; two results follow: venous stagnation and cardiac oppression. These are its primary symptoms. They indicate that it will be found useful in many weakened states of the heart, direct or reflex, but not in any organic disease except as a palliative. It should never be overlooked in the treatment of functional heart disorder in women with uterine trouble.

Its primary heart symptoms bear a singular resemblance to those of Cactus. It was a serious omission that no record was taken of the rate or quality of the pulse, and no examinations of the heart by means of the stethoscope. The cardiac disorders in which it may be found useful are *nervous palpitation, cardiac irritability*, and some other anomalous symptoms due to reflex irritation.

I should not be surprised if further provings and clinical ex-

perience would find it to be a remedy for *chorea*. It has one symptom already, namely, "convulsive contractions of almost all the muscles of the body, and a feeling as if she would be crazy if she did not hold tightly upon herself." This certainly simulates chorea or hysteria, or both.

Dr. Payne speaks very highly of Lilium in the long train of unpleasant symptoms which occur from "delayed post-partum recoveries." He finds the 30th to act well.

I append Dr. Farrington's excellent comparisons of Lilium with Sepia and Pulsatilla.

LILIUM TIGRINUM.	SEPIA.*
Mental symptoms almost identical.	
HEAD.	
Headache from forehead to occiput.	Headache from occiput to forehead.
Fear of insanity.	Fear of apoplexy.
Taciturnity.	Loquacity.
STOMACH, ABDOMEN.	
Drinks often and much.	Usually thirstless.
Longs for meat.	Averse to meat.
Smarting after stool (like a cathartic).	Tension ani after stool.
Urine retained causes oppression of chest.	Urine retained; anxiety, pressure on bladder.
FEMALE ORGANS.	
Absence of feeling in head; wild looks when menses cease to flow.	Mania caused by too profuse menses.
Menses generally scanty; cease when sitting down; flow while moving about.	Menses generally profuse; they flow only in the morning.
Leucorrhœa, *brown*, yellow, excoriating; worse after menses.	Leucorrhœa green or milky, excoriating; worse before menses.
Bearing down; funnelling toward the vulva or anus; better from support.	Bearing down over whole pelvis; must cross the limbs.
Burning (less stinging), cutting in the ovaries; congestion.	Stinging in the ovaries; congestion.

* It is not a little singular that the isomorphic group, of which Sulphur is the type and Sepia an analogue, should find such similar drugs in the Liliaceæ and analogues; thus Sul. and Aloes, Phos. and Cepa, Ars. and Allium sativum, and, here, Sepia and Lilium.

LILIUM TIGRINUM.	SEPIA.
FEMALE ORGANS.	
Slow recovery after confinement; lochia too long; uterus remains large; must support the vulva to prevent everything from escaping; at times better, at other times worse, from riding.	Slow recovery after confinement; lochia very fetid; become "pot-bellied;" must sit down and cross legs to prevent prolapsus; always worse riding (horseback).
Mammæ tender; *cutting through to left scapula.*	Mammæ sore, hard lumps; stinging pains; cracked nipples.
MALE ORGANS.	
Sexual excitement; emissions, followed by difficulty in fixing the mind; choose the wrong word; irritable; blurred sight.	Emissions, followed by vertigo, irritability, sensitiveness to damp weather; *mental exhaustion.*
CHEST, HEART.	
Both affect similarly the venous system; both cause congestive asthma, pulsations all over the body; congestion to heart, worse from motion, better from pressure and rubbing; in both there is chilliness, combined with internal heat in the chest.	
Becomes worse if retain urine; sighing relieves; uterine troubles; pain through left mamma to back; dragging of all the viscera.	Comes on when awakening from sleep; uterine and hysterical, followed by jerking in one side. Hard, teasing cough.
Heaviness in the region of the heart, worse after eating.*	Intermitting beats of heart after eating.
Pain as if the *heart were alternately squeezed and relaxed.*	Palpitation, with intense stitching pains in the left chest.
Congestion to the heart; pulse weak; heart feels *full to bursting;* taste of blood; faint; chills run down from face to chest; heart feels cold in the open air.	Congestion to the heart; bubbling in left chest, as if hæmoptysis were coming on; burning in the face; beating felt in the pit of the stomach.
GENERALITIES.	
Both suit the weakened system, especially that of the female; fearful about one's health; hurried, nervous, fidgety; so nervous, the least excitement causes cold, clammy hands, palpitation, etc. In both the cause of the debility seems to	

* The heart symptoms of Lilium occurred late in the proving, and are hence very characteristic. They seem to be mostly attended with congestive symptoms, and are linked with the urinary disturbances. But they occurred in both sexes and exhibit strong resemblance to organic disease.

consist in a relaxation of the ligamentous structures, serous sacs,* and veins. The first two causes account for the empty, gone feelings; weak knees (even cracking in Lilium, from deficient synovial fluid); prolapsus, etc. The last explains the readiness to portal stagnation (Sepia), fulness of the chest, heart, and veins of the extremities. The most important distinction, besides those already given, is the following, because no characteristic of the respective remedies:

LILIUM TIGRINUM.	SEPIA.
Remission *forenoon*.	Remission *afternoon*.

PULSATILLA—LILIUM TIGRINUM.

Pulsatilla and Lilium, although unlike in their general indications, bear the closest resemblance in their action on the veins. They have the same fulness of veins, chest, and heart; worse in the evening and better in the open air. Heart too full of blood, with weak, feeble pulse, faintness, inclination to take a deep breath. Such symptoms often occur in enlargement, involving the right heart.

Pulsatilla, though feeling chilly, finds relief in the open air, and from walking; Lilium finds relief in the open air (except headache); but the cold air makes the heart feel icy cold; motion aggravates. If the urine is retained the congestion seems aggravated.

Lilium, like Pulsatilla, causes scanty menses; but the former has irritable mood; wants to die, and yet knows not why; solicitude about health; absence of feeling in the head, with amentia; longs for meat; diarrhœa hurries her out of bed in the morning. Pulsatilla has gentle, tearful mood; wants to die, but fears it; solicitude about health and salvation; mania, with amentia; averse to meat; diarrhœa after midnight. Remission, in Lilium, *forenoon;* in Pulsatilla, *midnight, until noon* (except diarrhœa).

* Dr. Hering taught long ago that serous membranes, containing little or no air in their sacs, acted by suction in keeping viscera in place. Aconite seems to excite them, Sepia, Iodine, etc., to relax them.

LYCOPUS VIRGINICUS.

This little plant has been of great interest to me ever since I first used it. The following is the history of the Lycopus, as given by Professor Rafinesque in 1828. It is the only clear account we have of its introduction into medical practice:

The *Lycopus Virginicus* is an excellent sedative, subtonic, subnarcotic, and subastringent. It has only lately been taken notice of, while the *Lycopus vulgaris* was extolled in Europe for fevers. Schœff only mentions its qualities, and it is omitted in all the books of Materia Medica, except Ives and Zollikoffer. The first inquirers on its properties were Drs. Pendleton and Rogers, of New York, who have published several cases of hæmoptysis and incipient phthisis cured by it. This has been confirmed by Drs. J. M. Smith, Ives, Lawrence, and myself. It is now much used in New York and New Jersey. The whole plant is employed; it has a balsamic, terebinthaceous smell, peculiar to itself, when bruised, which is stronger in the seeds. The taste is pleasant, balsamic, and slightly bitter, but to some it appears mawkish and nauseating. It is described as partaking of the properties of *Digitalis, Sanguinaria, Cimicifuga,* and *Spigelia,* but it is neither diuretic or anthelmintic, and is rather one of the mildest and best narcotics in existence. It acts somewhat like Digitalis, and lowers the pulse without producing any of its bad effects, nor accumulating in the system. It is, therefore, altogether preferable to it, and not only an equivalent, but even a valuable substitute, as I have ascertained upon myself and many others. Volumes have been written upon the Digitalis, a rank poison, and this excellent substitute is hardly noticed yet. It has, however, been used in the New York Hospital, and found very beneficial; it lessens the frequency of the pulse, allays irritation and cough, by equalizing the blood. It is said to be most useful when febrile excitement has been subdued, but I have seen it to subdue it by itself, as with other tonics. I have made many experiments on this plant, and the results are, that although it does not cure the consumption, nor heal the lungs, it is very useful in hæmoptysis, a plethoric habit, and internal inflammation. I consider it as a very good substitute to all narcotics, prussic acid, and even to bleeding, since it produces the same state of the pulse and arterial system, without inducing any debility, nor acting on the heart or brain in any injurious manner. It may be used in many diseases, and whenever it is required to quell inordinate actions of the blood, or even other fluids. I have been informed that it has been commonly used in New Jersey for diarrhœa and dysentery, which it helps to cure. It is a good adjunct to tonics and fevers. It is also peculiarly useful in the inflammatory diseases of drunkards, in diseases of the heart, etc. I deem it the best sedative in almost all cases; it does not seem to act on the nervous system, but chiefly over the blood vessels. The usual way to take it has been in the form of a warm infusion, allowed to cool, taken as diet drink, and without much nicety about the quantity. In hæmoptysis I prefer a lemonade made with a weak tea of it, or a syrup made with it. A very strong infusion may also be used by putting one or two teaspoonfuls of it in tonic or refrigerant drink.

(The Professor's English was rather faulty.)

Wood and Bache do not make much mention of the Lycopus, quoting a remark of Dr. Ives, that "it is a mild narcotic," and alluding to its alleged virtues in pulmonary complaints. Stillé does not notice the plant at all, and other allopathic authorities are equally silent. Authorities in the eclectic school bestow a more extended notice on the plant. Many of the practitioners of that system estimate its virtues very highly.

Dr. King* mentions it in the following manner:

The exact medicinal virtues of this plant are not well determined. It appears to possess sedative, tonic, astringent, and narcotic properties, and has been successfully used in incipient phthisis, hæmoptysis, and other hæmorrhages; it soothes irritation, reduces the frequency of the pulse, and lessens cough. It acts somewhat like Digitalis, in reducing the velocity of the pulse, but it is devoid of the dangerous effects resulting from the use of that drug. It is decidedly beneficial in the treatment of diabetes, having cured when all other means were useless; and has been of service in chronic diarrhœa and dysentery, inflammatory diseases of drunkards, diseases of the heart, and intermittents. Dose of the powder from one to two drachms; of the infusion, from two to four fluid ounces.

Dr. Scudder† places it in his class of "Sedatives" along with Veratrum, Aconite, Gelseminum, Digitalis, etc., but admits that it differs considerably from those agents in its action on the system. He says:

It is a mild sedative narcotic, feebly tonic, and moderately astringent. . . . . It is employed in all cases of excessive vascular excitement with great advantage. Its mild and congenial sedative properties render it a remedy of great value in lessening tumultuous action. For this purpose it has been employed in febrile and inflammatory affections, more especially in the various forms of pneumonia. In these diseases its mild sedative and narcotic properties render it peculiarly valuable in lessening general irritation and diminishing exalted organic action. In acute diseases of this character, and in the chronic diseases of the respiratory organs attended with hæmorrhage, it is very useful. In those diseases of a chronic character, in cases of great weakness in the thoracic organs, in cases where there is a frequent hæmorrhage, or a tendency to hæmorrhage, from these organs in the incipient form of phthisis, or even when the complaint is somewhat advanced, and even in the confirmed stages of that complaint, the sedative and tranquillizing influences of the Lycopus, together with its mild tonic and astringent properties, render it an agent of very great importance. It somewhat lessens the momentum of the circulation, the irritability and excitability of the nervous and vascular systems, and hence controls febrile excitement, and lessens the heat of the

* Eclectic Medical Dispensatory.

† Materia Medica and Therapeutics.

body; it lessens irritation in the lungs, and consequently the harassing and exhausting cough; and if the patient is the subject of hæmorrhage from the lungs, it lessens vascular excitement and the quantity of blood that circulates in the lungs in a given time, and in this way the irritation and the cough, and in the advanced stages of the disease, when the expectoration is copious and debilitating, the sedative, astringent, and tonic influences of the Lycopus point to it as an invaluable palliative remedy, if not a curative remedy in all such cases. Its properties cannot injure under any circumstances of the kind, and it may be resorted to with a strong probability of at least mitigating all the urgent symptoms, and even of effecting a cure.

The same remarks will apply to its utility in hæmatemesis, hæmaturia, uterine hæmorrhage, and hæmorrhage of the bowels, etc. It acts somewhat like Digitalis, says Rafinesque, in lowering the pulse without producing its bad effects and accumulating in the system. He also says it is one of the mildest and best narcotics known. It is useful in gastritis and enteritis in allaying irritation and inflammation. It has been used freely and successfully in dysentery and diarrhœa. For this purpose it may be boiled in milk, with cinnamon or some other aromatic added, and taken freely. It has been highly and very justly extolled in diabetes. It is very useful in palpitation of the heart, in hypertrophy of the heart, in dilatation of the ventricles of that organ, as in cases of aneurism of any of the large vessels contiguous to the heart. In cases of palpitation, whether arising from an organic disease of that organ, or from some nervous irritation, or whether it be symptomatic of some other disease, the Lycopus is valuable in either case to lessen irritation and organic action, and consequently the suffering and great anxiety which the patient always experiences in those affections."

The pathogensis in Vol. I is made up from provings by Dr. Chandler of this country, and Dr. Morison, of England, with my own observations.

In the second edition of "New Remedies" I wrote:

I have quoted the remarks in full relative to this interesting indigenous remedy, in order that the reader may get a general view of its character and effects as viewed from a standpoint of allopathic therapeutics. All seemed to accede to this, namely, that it possesses a peculiar sedative power over the circulation, and the sedation is held in check by another power, which is denominated a tonic influence; also that it has some astringent, nervine, and a slight narcotic influence. This really comprises all that is at present known by other schools concerning the plant.

The Lycopus has not been used in homœopathic practice by other physicians than myself. If any have used it, it has not come to my knowledge. My first use of the plant was at the suggestion of an eclectic practitioner, whom the friends of one of my patients, suffering from symptoms of incipient phthisis, had requested to consult with me relative to the diagnosis of the case. The patient had some febrile irritation, a quick weak pulse, occasional hæmoptysis, dyspepsia, weakness, and many other suspicious symptoms. We detected a deposit of tuberculous matter in the apex of the left lung. The action of the heart was quite

irritable, palpitation occurring from the least exercise. The eclectic suggested the use of Lycopus, if other means failed to retard the morbid activity of the circulation. No improvement having followed the use of the ordinary homœopathic remedies, the Lycopus was resorted to. In the absence of the tincture, I ordered an infusion to be made of the fresh plant (one ounce to one quart of water), a teaspoonful to be taken every three hours. Its beneficial action soon appeared, and in a week such notable improvement had taken place that the medicine was continued at longer intervals, and in two weeks more the patient—a lady—went East, apparently cured. This favorable experiment led me to use it further in similar cases, and my experience with it has been quite satisfactory. In those cases of pulmonary disease associated with looseness of the bowels, its curative action is sometimes very marked, and in incurable cases it often acts as a useful palliative. I give the tincture, or tincture triturations from the first to the third attenuation, and sometimes the infusion and syrup prepared to represent the lower dilutions. This plant has not been thoroughly proven, and its pathogenetic range of action is not settled. One proving has been made, however, which is interesting and suggestive, as it proves that the curative effects observed by eclectic and allopathic physicians were due to its power of causing *similar* physiological disturbances.

Since the above was written, now nearly seven years, the Lycopus has been used a good deal in our school. It has become one of my most favored and trusted remedies in functional diseases of the heart. There are two conditions of the heart for which Lycopus appears to me to be indicated, and in which I always have had good effects from it.

(1.) In *cardiac irritability with depressed force.* In these cases the pulse is very frequent, small, compressible, and often irregular and intermittent. The heart's impulse is feeble, the patient is generally nervous, irritable, and his extremities are cold. In this condition slight hæmorrhages from the lungs are not infrequent. He cannot go upstairs or walk fast without rapid and weak action of the heart or heavy *oppressed* action, which, under some conditions, denotes the same weakness. In both the provings, this very condition of the heart was caused. It is *primarily* homœopathic to this state. I have excellent success in such cases with the 1^{x}, 2^{x} or 3^{x}, in ten-drop doses, every three or four hours. In a few days the pulsations decrease in average frequency from 110 to 74, and increase in strength; and the general condition of the patient improves. I have many tables of the pulse-rate, kept by my patients, which illustrate this curative action of Lycopus.

(2.) The other condition of the heart in which I have found Lycopus useful, may be called a *cardiac erethism,*—a condition in

which the debility of the heart is marked by the influence of a smouldering inflammation somewhere, generally in the *lungs*. In these cases the heart's action is quick, the pulse *quick, hard, wiry*, not easily compressible, and not generally irregular or intermittent. Aconite acts well for a time, but it will not do to use it too long. The Lycopus, however, while it reduces the force and frequency, by virtue of its secondary homœopathicity, relieves the local congestion and irritation of the lungs, quiets the cough, prevents the hæmoptysis, and except in cases of tuberculosis will, aided by other remedies having a tissue-affinity for the lungs, cure the whole malady. These cases require large doses,—from five to ten drops of the mother-tincture, or 1ˣ, repeated several times a day for weeks.

Dr. Morrison, of this country, reported the following case for my second edition. It is so singular that I reproduce it:

A woman, aged thirty-three, a teacher, of nervous temperament, light hair and eyes, inclined to hysteria, menses uninterrupted since the third month after their first appearance. The menses would appear within three or four hours of the same time every month, with a deepseated pain, with heat in the occiput; after a few hours a pain would seize her in the forehead and temples, with faintness and nausea at the stomach, a sensation of great weakness in the lumbar region, general lassitude and debility, especially in the limbs, followed by torpor and heaviness in the limbs. When the nausea set in the occipital pain was ameliorated. There was aversion to the smell of food. With these symptoms would be an appearance of protrusion of the eyes, with a wild and strange expression. The menses would usually appear in the morning and flow until noon, then suddenly cease, or they would last from half an hour to six hours, intermitting in this manner for ten or twelve days. While she was usually of a cheerful, sprightly, talkative disposition, during the menses she was stupid, had a lack of expression and a vacuity of ideas.

There was also tympanites, puffing of the parts on and around the pubis and vulva, a dilated condition of the vagina, and a bearing-down sensation in the rectum. On examination the vagina seemed very hot, the os uteri engorged, and swollen. From the use of ice locally, these conditions and the puffiness would disappear. Constipation existed, the bowels acting only once in six or seven days, the stools dry and claylike.

Heart's Action.—When the eyes seemed protruded, the heart would seem to act tumultuously and forcibly; it could be heard several feet from the bed. (At these times the puffing of the pubis was worse.) When the heart's action was feeble and quiet, with quiet pulse, the puffing about the genitals was better. At times the pulse would be small, quiet, and could scarcely be counted. Urine scanty, thick, and muddy; œdema of the feet. This kind of cardiac trouble seemed to be hereditary, as her mother had been similarly afflicted. With the exception of some dyspeptic symptoms, no other organ seemed diseased.

All, or nearly all, the above symptoms would disappear after the menstrual flow ceased, or at the expiration of ten or twelve days.

After trying many remedies for several months, without benefit, the *Lycopus virginicus* was given with the effect of dissipating the majority of the symptoms, and a steady improvement has since occurred, until she is now quite well.

Remarks.—Dr. Morrison's case is quite suggestive, especially in relation to the abnormal action of the heart, which seems to have been the *cause* and not the effect of all the patient's symptoms. It would follow that Lycopus, by its specific action on the heart, cured indirectly all the abnormal manifestations.

The case was doubtless one of *exophthalmus*, and is one of the few instances of that strange malady being relieved by any medicine.

Dr. Morison, of England, gives us the only clinical report of its use from that country. The symptoms prescribed for, resemble those in his own provings:

Mrs. A. W., hysterical temperament, consulted me on the 13th September; age forty-seven; no appearance of menses for three years. Complained of occipito-frontal headache, debility, flushings, dyspnœa, palpitation easily induced, with occasional intermissions, flatulency, giddiness, huskiness of throat on right side, interscapulary pains, pains down the lower limbs, commencing on left side; dreamy sleep. ℞. *Lachesis* 12.

September 17th. Complains of fronto-occipital headache, on excitement; palpitation "all over;" swelling of legs and ankles on exertion. General symptoms unchanged. ℞. *Lycopus* 3ˣ om. ℥ tiis horis.

September 23d. Swelling of ankles; flatulency, and dyspnœa lessened. Cardiac pulsation regular, not intermittent. Has also found relief from shooting pains in left wrist and elbow. Flushings continue. Rep.

September 27th. Complains much of "strange feelings," with fronto-occipital headache, "as if the temples were pressed in;" seems afraid to turn for fear she would tilt forward; nausea from epigastrium; depression; for several years has dropped things from her hands; flushings; sudden pains at apex of heart, "causing faintness and strange sensations" ("I often wonder whether my heart is affected"); interscapular pain; this week, restless and dreamy sleep; less palpitation; less pain and swelling of legs and ankles; constipation; appetite good. Auscultation reveals feeble action of heart; no murmurs; pulse stronger than indicated by cardiac action, 80 sitting and standing, regular. Considering that some of the symptoms were due to drug action, I prescribed ℞. *Spt. vini rect.*

October 4th. Still have severe pain in temples and occiput, with nausea; flushings. Other symptoms, including cardiac, much relieved. Sleep better; pulse 80, sitting and standing; feeble. ℞. *Lycopus* 3c, 4tuor in die.

October 11th. Has had a bilious attack, with vomiting of food. Used formerly to have severe pain across hypogastrium, with such attacks, but was free on this occasion. Still has flurried feelings and flushings, but lessened. Beatings through

temples to occiput, with sensation of stoppage in larynx (nervous). Sleep much better; dreams less; less palpitation; sudden pains at apex, but lessened in frequency and intensity. Pulse 102 sitting, 112 standing; very feeble. ℞. *Spt. vini rect.*

October 18th. Hysterical, with bilious feelings. Faintness, sighing. Other symptoms about the same. Pains in head and temples. Pulse 72, feeble, regular, sitting; resps. 18. ℞. *Lycopus* 3, 4tuor in die.

October 25th. Less sighing; less giddiness. Pulse 80, feeble and irregular, sitting; 92, feeble and regular, standing; resps. 19. There was decided improvement in several respects; but at this point it became necessary to change the remedy, owing to the setting in of severe bilious derangements.

NOTE.—The prominent symptoms which *Lycopus* failed to relieve were,—neuralgic pains in the left side of the face; flushings, with sense of heat; choking sensation in throat, and hepatic complications.

I doubt if the supposed aggravation was from Lycopus.

The Lycopus has been found curative in *diabetes mellitus*.

Dr. Ray reports several cases in the "Eclectic Medical Journal." They were characterized by the flow of a gallon or more, daily, of clear urine, of great density, containing sugar, intense thirst, great emaciation, and other well-known symptoms of the disease.

After trying a rigid diet and various medicines without much good result, the fluid extract of Lycopus was given, in doses of thirty drops, three times a day, with surprisingly prompt effect. All the symptoms rapidly gave way, until the patients were apparently cured. Thus we have another remedy for that serious and often intractable malady.

Since the appearance of the last edition, I published in the "North American Journal of Homœopathy," November, 1878, a remarkable cure of *diabetes mellitus*, by means of the Lycopus in infusion, ℥j of the herb to Oj of water, a tablespoonful five times a day, continued several weeks.

The *action of Lycopus on the heart* has not been sufficiently studied by means of experiments on the healthy. Dr. Morison, of England, is the only one who has attempted a thorough proving with large crude doses. It is to be regretted that he was not in good health, and that his heart was not in a normal condition. The two experiments of provings he has made are valuable, inasmuch as the *sphygmograph* was used in each proving, and the pulse-tracings given.

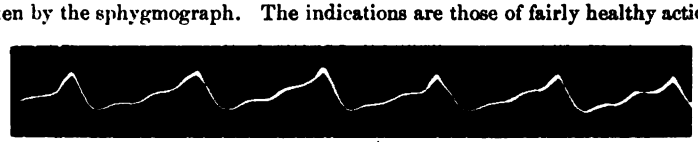
The record of his first proving begins by giving his state of health at the beginning of the proving, as follows:

State of Health.—Usually good, though not robust. For the last nine years (since residing in England), tendency to rheumatic pains, with slightly depressed cardiac action. The oppression of crowded rooms induces faintness. For about a week tendency to diarrhœa. Slight attacks of spasm of the intercostals, which have troubled me for about a month, consequent on the effects of arsenical wall-paper. Depression of vital energy from a long strain of work.

Examiner's Report (by a hospital physician).—"Impulse of heart rather feeble. Percussion shows that the heart is of natural size. There is a distinct systolic basic murmur heard at the second left interspace, which I have no doubt is hæmic. The first sound at the apex is not good, and rather murmurish. Occasionally intermission in the heart's beats."

Clinical Observations.—Pulse 70 (sitting); temp. 36.40° C.; resps. 20. Urine clear, bright (even after standing the whole night), acid; sp. gr. 1012; free from albumen.

Proving.—Sept. 5th, 1872, 10 P.M., *Lycopus mx-ϑ*. I append pulse-tracing as taken by the sphygmograph. The indications are those of fairly healthy action:



September 7th. Dose, 25 drops tincture. The heart has already begun to show its action in the weakened impulse of that organ, as witness the following tracing. Pulse 76; action fairly regular:

September 8th. Took 60 drops. The pulse was 80, standing, with distinct intermissions, with some *cardiac oppression.*

Dr. Morrison says he uses the term "cardiac *oppression*," to denote heavy, labored action, as if the heart were obliged to make great effort to do its work.

September 9th. Took 60 drops. Cardiac oppression; pulse 80, sitting, with the following pulse-tracing:

September 10th. Took 60 drops. Cardiac *de*pression when lying down, with dull, heavy beating, lasting several minutes. Pulse 74, sitting and standing, varying in volume. (*De*pression indicates feeble and excitable action.)

September 11th. Took 75 drops. On waking intermittent action of the heart; intermissions at 7th, 8th, 6th, 9th, 21st, 23d, and 88th beats. A few minutes after, intermissions between the 6th and 15th beats; later it beat 70 (lying).

September 12th. Took 50 drops. Pulse irregular and intermittent, specially so when lying, quickened by each inspiration.

September 13th. Took 50 drops. "Pulsation scarcely perceptible to the touch." Pulse 72, regular, with this tracing:

September 14th. Took 60 drops. Awoke at 5. Pulse 74; intermissions at 7th, 11th, 31st, 10th, and 20th beats. At 8, pulse 72, not intermittent. 10 A.M., pulse 74, lying and sitting; 82 standing; general debility. At noon, pulse 82, sitting; 86 standing, irregular and intermitting. Five minutes later, subacute pain at apex, extending to third left interspace.

September 15th. Took 80 drops. Rheumatic pains about the heart. Palpitation on slightest exertion. Pulse, lying, 60; sitting, 66; standing, 80.

September 16th. Took 100 drops. Labored cardiac pulsation in the morning. In the following tracing the *jerking* character of the heart's action is well expressed:

September 19th. *Examination* of heart. "Heart-sounds indistinct, systolic running into diastolic; action very feeble." Pulse 78, sitting; 86 standing, not intermittent (noon). In the afternoon the pulse came down to 62 sitting, 64 standing, irregular. (Took 180 drops.)

September 20th. (No medicine after this date.) Much darting pain at the apex of the heart, with general debility.

September 21st. At noon, pulse scarcely perceptible, 76 sitting, regular; 84 standing, irregular. The tracings showed feeble action, obtained with difficulty:

Examination showed the pulse extremely varying, both as to time and volume, at first almost imperceptible, 76 to 86, sitting and standing, not intermittent. *Cardiac* pulsations much stronger than the pulse indications would lead one to expect. No murmurs.

September 24th. *Examiner's Report.* "Impulse feeble; heart-sounds very weak; action irregular in force and rhythm, not intermittent, no murmurs." Pulse feeble, very compressible.

September 25th. Pulse 68, sitting. The subjoined tracing was taken with difficulty, at former pressure, owing to feebleness and compressibility:

September 26th. Pulse 62, lying; feeble, less compressible (in morning). In evening marked cardiac *de*pression, causing slight faintness on quickly ascending a few steps, lasting fully half an hour; returning later on quietly ascending, with subacute cardiac pain; cardiac action barely perceptible; pulse stronger than cardiac action would indicate; regular.

September 27th. Subacute pain over cardiac region, with cardiac distress. Pulse compressible, irritable, varying in force and rhythm, with frequent intermissions; sighing respiration; cardiac *de*pression.

September 29th. Labored cardiac action, followed by cardiac depression, with faintness; pulse, at same time, 76; stronger than cardiac impulse indicates.

September 30th. In evening cardiac *de*pression, causing faintness.

October 1st. *Examined:* Cardiac impulse very feeble; hæmic murmur again distinct; no other murmurs; pulse feeble, extremely compressible, irregular in force and rhythm, not intermittent; 72 to 80, sitting and standing, quickened by movement.

October 3d. The annexed tracing was taken last evening, with a pulse so feeble as to render it being taken at former pressures a matter of considerable difficulty:

October 9th. Cardiac depression has been the rule up to this date. To-day it is 78 sitting, 88 standing; irregular in rhythm; extremely compressible.

October 10th. 7.30 P.M., marked cardiac depression; pulse stronger than indicated by cardiac impulse; 66 lying, sitting, and standing; extremely irregular in force and rhythm; respiration oppressed; lasting till 9 P.M. The annexed pulse-tracing shows the character of the heart's action at the time. Owing to slow running of the paper this tracing is rather cramped, but the curves are

well marked. A singular feature in this tracing is its resemblance, in the main points, to one recently taken on a patient, aged 31, afflicted with severe mitral regurgitant disease, which latter I annex for the sake of comparison. It should be mentioned that this is not the characteristic tracing of mitral regurgitant disease:

For the sake of clinical comparison I append a second tracing, taken from the same patient ten days after, while under the influence of *Digitalis*, of which *Lycopus* appears to be an analogue:

October 15th. No special symptoms since last report. The fæces are gradually assuming their natural character. Cardiac action still rather depressed.

Examiner's Report (by first examiner).—"Cardiac impulse feeble; hæmic murmur distinct on strong pressure; systolic sounds not quite natural at apex, not amounting to a murmur, probably due to feeble action; pulse regular, very compressible, 76 sitting." 10.30 P.M., pulse, 68 sitting, 72 standing, regular, compressible; temp. 36.40°; resps. 20. Urine clear, acid; sp. gr. 1014. This completes the proving.

Dr. Morrison made a second proving some time afterwards, beginning with the 200th potency, one dose, and ending with the θ.

April 17th. Five drops of the 200th in the evening. On lying down he observed palpitation with altered rhythm, the systole being shortened and the interval lengthened.

April 18th and 19th. No cardiac symptoms.

April 20th. Cardiac depression in the evening; pulse, 68 sitting, irregular.

April 29th. Ten drops θ. The next day on waking pulse 60, feeble, irregular, and intermittent. In P.M. pulse 76, feeble, regular, as shown by the following tracing:

May 1st. Forty drops θ. No heart symptoms for seven days.

May 8th. 120 drops θ. Two hours afterwards had oppressed respiration, with sighing, vertigo; pulse, 80 sitting, 88 standing, irregular; cardiac depression. On the 9th and 10th he felt the same symptoms. On the 11th he had acute darting pains in the heart, with complete intermissions, lasting nearly an hour. On the 6th of July he says: "During the last three weeks I have felt quite as well as usual; but this morning, on rising, noted slight weakness of the pulse, with slight irregularity of rhythm." He took 90 drops of the 200th. He records "diminished pulse-force, with occasional intermissions a few minutes after; and in the evening, pulse 66 sitting and standing, very irregular in force and rhythm."

(I cannot see that the 200th had any effect in this instance. The symptoms of the morning, before the dose, were simply continued during the day.) It appeared to act curatively only, as the pulse tracing of the next day shows:

Remarks.—These provings of Dr. Morison, while they throw much light on the action of the drug, and denote great care and

ability on the part of the prover, are not what we require to perfect our knowledge of the action of Lycopus on the heart.

To obtain a thorough insight into the powers of a drug, the prover should be a healthy person. Dr. Morison was not healthy; he says he "had had for years a tendency to rheumatic pains and slightly depressed cardiac action. The oppression of crowded rooms causes faintness." This latter symptom always denotes a weakened heart. The *examination* of the heart at the beginning of the proving showed the *impulse* to be *feeble*, with *intermissions*, etc. Moreover, he says: "At the period of commencing the proving, and for weeks after, he had late hours and hard labor; all of which would induce feeble and labored cardiac action."

But, admitting all these, the Lycopus, doubtless, had some pathogenetic action on the heart, for it seemed to regain its usual power when the drug was left off. It was simply an experiment upon a prover who had a condition of the heart *similar* to that caused by Lycopus, and the drug *aggravated* the existing cardiac debility. But from these aggravations we can deduce valuable information.

Taking these provings, together with my own experiments and clinical observations, I believe the action of Lycopus on the heart, when taken in massive doses, may be thus stated:

Primarily, it weakens the power and vitality of that organ, decreasing the blood-pressure in the arteries, and consequently the *tension* everywhere.

It renders the action of the heart irregular, intermittent and quicker, especially on motion. It causes *op*pression from labored action before it causes *de*pression; or the two sensations appear alternately. The *pains* caused by Lycopus are not rheumatic, but "rheumatoid;" or, more properly, *myalgic*, the result of general muscular enervation.

It does not appear to affect the *nerves* specifically, but may indirectly weaken the retardators and inhibitory cardiac. The *vertigo* is quite notable, and indicates decreased arterial pressure in the head. The ultimate result of a heroic Lycopus proving would be to cause *hypertrophy with dilatation*, if the experiment could be carried far enough.

(It is doubtful if it possesses sufficient power to cause such a result in a *healthy* person.)

Secondarily, the action of Lycopus, or the *re*action from the primary symptoms, would be to cause an exceedingly irritable heart, with a tendency to hypertrophy with enlargement, or hypertrophy with dilatation, and even valvular disease. Even "Graves's disease," or "exophthalmus," might result from its secondary effects.

It is difficult at this time, and with the knowledge we now possess, to more clearly define its primary and secondary action.

Clinically, the value of Lycopus, in all the conditions similar to its primary and secondary action, is undoubted. It is *primarily* indicated in cases where the heart has become weak and irritable from physical causes, namely, such as originate from overstrain of that organ; from a rheumatic affection with constitutional debility; from abuse of cardiac depressants, or cardiac stimulants. I do not think it will be found as useful when the primary cause of the cardiac debility is in the nervous system. In these conditions it should be generally prescribed in the attenuations, even the higher.

It is *secondarily* indicated in excessive cardiac hyperactivity, hyperæsthesia, hypertrophy (either eccentric or concentric), whether from muscular weakness or sympathetic with disease in other organs. (During the primary action of Lycopus on the heart, a general venous stasis occurs in all the organs of the body, notably the liver, lungs, and kidneys; consequently it is secondarily indicated when the heart disorders arises from such causes.)

Even in cases where the cardiac irritability arises from erethism of the nerve-centres, the Lycopus is secondarily indicated, for reasons which will occur to any physiologist.

The dose, when secondarily indicated, ranges from the lowest dilutions to appreciable quantities of the matrix tincture or infusion.

In several cases of irritable heart, where the pulse was quick (140), but regular, and with sharp, jerking impulse, the persistent use of the tincture, in doses of ten drops, three and four times a day, has brought the pulse down in the following manner: When first taken, the pulse was in the morning, 120; noon, 130; night,

140; from this it dropped in a week, gradually, to 68, morning; 74, noon; 80, evening. This occurred under the influence of decreasing doses, and the improvement was *permanent*, showing that it was not merely a palliative effect of the medicine.

LITHIUM CARBONICUM.

The Carbonate of lithium is not very widely diffused in the mineral kingdom. Lithium, in some form, is, however, found in certain mineral springs, namely, the Carlsbad, Franzensbrunn, Weinbrunn, in Europe, and the Gettysburg water of this country.

Hering, among other reasons why the Lithium should be proven, says that Uric acid is sparingly soluble in water,—one part in ten thousand. Carbonate of lithium is soluble in water, one part in one hundred. But this one part renders soluble four parts of Uric acid, increasing its solubility four hundredfold. Uric acid calculi have been corroded by a solution of Carbonate of lithium (one in one hundred) to such an extent as to lose five grains in five hours. It has been recommended, and I believe used successfully, as an injection into the bladder, to dissolve such calculi.

In commenting on the provings, Hering calls especial attention to the eye-symptoms, the heart-symptoms, and the renal-symptoms.

It certainly causes some very marked eye-symptoms, such as *hemiopia*,—the right half of objects are *invisible*.

A Dr. L. Kenyon reports two cases of *ophthalmia*, with redness of the sclerotica, muco-purulent discharge, sticking pains in the eyes, photophobia, and a sensation as of a veil before them. Cured by Lithium 12th.

I have frequently used Lithium in a peculiar soreness of the end of the nose—such as is described in the proving—and have cured obstinate cases that have annoyed persons for years. I used the 6th.

The gastric symptoms are not unimportant. It is said to cure *obstinate acidity of the stomach*.

It causes a disagreeable *gnawing* in the stomach, with pains in the temple and orbit. This gnawing was relieved by eating. So were the pains. Lachesis has a similar symptom.

I advise you to study the pathogenesis in cases of renal and

cystic disorders, not amenable to ordinary remedies. Dr. T. C. Fanning reports a case of disease of the right kidney and bladder ("American Homœopathic Review," vol. v), with the following characteristic symptoms: "Soreness of the bladder, and sharp, sticking pain in the neck of the bladder, on *right* side, with soreness there; frequent urination; pain in right kidney, and other symptoms found in the pathogenesis."

This case was cured by Lithium carb. Dr. Fanning thinks Lithium will cure *ovaritis* and *dysmenorrhœa*, especially when connected with the above symptoms.

Dr. Neidhard gave it in a case of heart disease, with "induration (ossification) of the aortic valves," with a "*bruit de scie*," followed by a bellows' sound within a small space in the region of the aortic valves; sharp pains shot through the back, through shoulder and arms; arm as if paralyzed. After taking Lithium, the case appeared aggravated, followed by improvement for many days.

Hering says it relieves *pain in the heart*, before and at the time of the menses; also that in cases of *deficiencies of the valves*, aggravated after mental agitations of a vexatious character, with trembling in the heart, painful, extending to the shoulders and into the head, as a throbbing, the Lithium gives prompt relief.

Neidhard says it has cured "rheumatic soreness in the region of the heart." I have never had occasion to use it in heart diseases.

Theoretically it ought to be useful in *rheumatism and gout*. But the only clinical experience I can find is that of a Dr. Whitey, quoted by Hering, who cured "painfulness of the feet, ankles, metatarsus, and toes; also on the border of the foot and sole."

There is a kind of *sore throat*, in which the pain seems to extend up to the ear (through the Eustachian tube) and back again. Lithium has this symptom.

Before the Bromide of lithium was used, Hering predicted that it would be useful for ear and lung diseases, and advised a proving of it.

The Gettysburg water has been partially proved, but no important symptoms elicited.

LOBELIA CERULEA.

The Blue Lobelia was first mentioned by Dr. Hering. The provings he collected were published in the first volume of "American Institute Transactions," but it has been rarely used in practice, except by the veterans Jeanes, Williamson, and Neidhard.

Dr. Jeanes cured a group of symptoms, of which *melancholy*, with pain under the short ribs of the left side from back to front, were the principal. He supposed the spleen was affected. In such a case I should have given Cimicifuga.

The old botanic doctors, who valued the Lobelia inflata so highly, make no mention of this species. Rafinesque, however, says: "By their taste the species Lobelia syphilitica (now called *Cerulea*) and Lobelia cardinalis, appear to have properties somewhat similar but milder." He says the Lobelia cerulea has been analyzed and found to contain Silex, Iron, Muriate and Phosphate of lime. "It is a lactescent and nauseous plant, which has been deemed long ago to be diuretic, cathartic, emetic, with properties similar to Lobelia inflata, but less active. The root has been chiefly used. Dose, five to twenty grains in dropsy."

In the provings a tincture of the leaves was used. Either all the provers were suffering from bad attacks of catarrhal headache and catarrhal affections of the nose and throat, or this remedy is more specific for such affections than any we possess. If the provings are trustworthy, it ought to rival Iod. of ars., Hepar sulph., Hydrastis, Gelseminum, Cistus, or Merc. iod.

The head, eyes, nose, mouth, and throat symptoms form a perfect picture of a sneezing influenza, or catarrhal affection. The throat symptoms, especially, give a vivid picture of that variety of catarrh which affects the posterior nares, palate, fauces, and even lower portions of the throat. It does not seem to affect the larynx and bronchia, however.

This variety of catarrh more generally affects young boys and girls, and people advanced in life, although I have observed it in persons of all ages. It is difficult to cure, and if Lobelia cerulea will cure a portion of your cases, it is worthy your high esteem.

Dr. Neidhard has cured a *cough* of four weeks' duration, day and night, with "*dryness* of the back part of the throat," which doubtless caused the cough.

Neidhard cured some cases of pain in the back, running down the legs, which appear to have been cases of *sciatica*, associated with *rheumatic* irritation of the spinal muscles. The symptoms (see "Materia Medica") resembled those cured by Cimicifuga and Nux.

You will find this remedy difficult to procure at the pharmacies, but it is one that you can readily find and prepare for yourselves, for it grows everywhere. Gray still calls it Lobelia *syphilitica*,—a prostitution of the plant which ought not to be sanctioned, for its virtues in syphilis are purely mythical.

LOBELIA INFLATA.

Although this species of Lobelia has not attained anything like the celebrity in our school of practice that it attained in the Botanic and Eclectic schools, it is a medicine well worthy your study and investigation. Its medical history is very interesting. The early historians of New England inform us that it was considered a sacred plant by the aborigines, who used it in their great councils to clear their stomachs and heads and fit them for grave consultations and for battle.

It is interesting to know that many of the most ancient nations —Greeks and Asiatics—used certain plants for the same purpose. The plant used by the Greeks was the Veratrum album.* The remaining Indian tribes of this country all use certain emetic plants for this purpose.

An uneducated man, calling himself "Dr." Thomson, a native of New Hampshire, was the actual founder of that strange and ridiculous system of practice called the "Botanic," and although he claims to have discovered by accident the medicinal qualities of Lobelia, probably got his knowledge from the Indians who lived around him. From them he also got his practice of *steaming* the sick, for it is well known that this process is one very common among all Indian tribes for the cure of many diseases.

* See Hahnemann's Thesis on the Helleborism of the Ancients, "Lesser Writings."

As a literary curiosity, I quote Thomson's account of his "discovery:"

Some time in the summer of 1790, after I was four years old, being out in the fields in search of the cows, I discovered a plant, which had a singular branch and pods, that I had never before seen, and I had the curiosity to pick some of the pods and chew them. The taste and operation produced were so remarkable that I never forgot it. I afterwards used to induce other boys to chew it, merely for sport, to see them vomit. I tried this herb in this way for nearly twenty years without knowing anything of its medicinal virtues. It had never occurred to me that it was of any value as a medicine until, when mowing in the field with a number of men one day, I cut a sprig of it and gave it to the man next to me, who ate it. When we got to the end of the piece, which was about six rods, he said he believed that what I had given him would kill him, for he never felt so before in his life. I looked at him and saw that he was in a most profuse perspiration, being as wet all over as he could be. He trembled very much and there was no more color in him than in a corpse. I told him to go to the spring and drink some water. He attempted to go, and got as far as the wall, but was unable to get over it, and laid down on the ground and vomited several times. He said that he thought he had thrown off his stomach two quarts. I then helped him into the house, and in about two hours he ate a hearty dinner; in the afternoon he was able to do a good half-day's labor. He afterwards told me that he never had anything do him so much good in his life; his appetite was remarkably good. He felt better than he had for a long time.

Dr. W. P. C. Barton, in his "Medical Botany," thus refers to the history of this drug:

The first notice I can find in print of the medical virtues of Indian tobacco is simply a brief remark by Schœpf, that the root is astringent and used in ophthalmia. He seems to have had little knowledge on the subject, and from the manner in which the plant is mentioned by him, it may reasonably be expected that a vague rumor only of its medical properties had reached him. The next accounts we hear of it as a medicine are by the Rev. Dr. Cutler and the late Professor Barton.

As Dr. Thomson was practicing in Massachusetts, it may be inferred that Cutler or his informant obtained their knowledge of its virtues from him.

It was first introduced into the regular (?) profession in 1810, by the Rev. Dr. Cutler, of Massachusetts, whose attention was directed to it by Dr. Drury, of Marblehead, who had been cured of asthma by its use. It seems Dr. Cutler was suffering from the same difficulty; he used this drug and was cured. He published his case, which attracted the attention of the profession.

It was introduced into England by a Dr. Reese.

As regards its introduction into homœopathic practice it was first noticed in "Jeanes's Homœopathic Practice of Medicine," Philadelphia, in 1838, in which he detailed several cases of asthma and other diseases which were cured by this remedy.

But the first publication of its pathogenesis was by Dr. Alpheus Noack, of Leipsic, in his excellent treatise on the Lobelia Inflata, in the fifteenth volume of the "Hygea" (1841). This exhibits very extensive research; he has perhaps quoted every writer of any eminence who has mentioned this plant.

The experiments of Noack were accompanied by contemporaneous thermometrical, barometrical, and meteorological observations. Among the circumstances noticed in his experiment on his own person was the speedy decomposition of the urine passed on the first day of his trial. This had taken place by the next morning, when a rose-red sediment was deposited on the sides of the vessel, in which was found a small brown urinary crystal, which under a microscope of two hundredfold magnifying power had the form and size of a large currant, and formed a granular conglomerate.

Another proving is found in the "British Journal," vol. xvii, page 464; also in vol. i.

The first pathogenesis was published in the first volume of the "Transactions of the American Institute."

Notwithstanding it is claimed to be such a harmless plant by its votaries, it is capable of causing serious and fatal toxic effects.

Horses and cattle have been killed by eating it accidentally. Mr. Proctor gave a grain of Lobelina, in solution, to a cat. In less than two minutes it produced violent emesis and prostration, from which the animal recovered in three hours. Again, one grain of the substance in an ounce of water was administered directly into the stomach of the animal by an elastic tube. Immediate and total prostration was the consequence, which in half an hour rendered the animal almost motionless. The pupils of the eyes were much dilated. The animal gradually recovered its strength, but the effects of the prostration were evident for fifteen hours afterwards. No emetic or cathartic effects resulted.

Mr. Curtis and Dr. Peterson experimented with it on hedge-

hogs and cats. They noticed that the heart continued to beat for some time after breathing had ceased. Dissections revealed congestion of the lungs and venous system, as happens in case of death from asphyxia. The stomach and bowels were found to be in an inflammatory condition. Charles Whitelaw remarks that it causes cattle to become hidebound and affected with dandruff.

On man several deaths are recorded to have occurred from the use of this drug, both in this country and Great Britain. An inquest was held in England, in November, 1853, on the occasion of a death from Lobelia, by Dr. Letheby, Professor of Chemistry in the London Hospital. He stated that thirteen cases of poisoning had occurred from this drug within three or four preceding years. The doctor found in the stomach of a woman who had been poisoned with it, 110 grains; in the case of a man, a tablespoonful of the seeds, and in a child three years old, fifteen grains of the seeds in the bowels.

The following case of poisoning is found in volume vi of the "Massachusetts Reports."

A Mr. Ezra Lovett caught cold, and sent for Dr. Samuel Thomson, of Beverly, who forthwith obliged him to take three powders of Lobelia, successively, at half an hour's interval between each. Every powder produced dreadful vomiting; in the night long-continued and copious sweats occurred. Two similar powders given another day produced vomiting and extreme uneasiness; and the same given the following day sunk the patient into a state of great depression.

A few days afterwards the doctor returned, and finding his patient worse, gave him some more powders of Lobelia, which at first produced great uneasiness, but latterly became wholly inoperative. Thomson supposed that the medicine would be directed to the bowels and excite purging. However, in the evening the patient lost his senses, and was attacked with convulsions, so that two men were required to hold him. Not a whit the less, however, did Thomson continue to repeat the Lobelia, and gave his unfortunate victim two powders more. The patient grew gradually worse, and at length expired. Thomson was arrested on the charge of murder, but liberated, as the sad issue of the case could not be ascribed to malice on his part.

Inflammation of the stomach and bowels have been noticed after large emetic doses.

Dr. Teste's proving, which appeared in his "Materia Medica," is open to serious doubts of its trustworthiness. He says it produces an eruption similar to the *itch*, and he recommends Lobelia and Croton as the two grand specifics for that eruption; but no clini-

cal experience has ever been published to verify his recommendation.

The homœopathic profession remember distinctly with what boldness Teste pronounced the *dictum* in his "Diseases of Children," that Lobelia was a specific in all cases of recent itch, and that Lobelia *and* Croton were the specific remedies for the itch. Upon the appearance of that book, which shot like a meteor across the sky of homœopathic literature, and like an *ignis fatuus*, led astray those who followed its teachings, many physicians were induced to test the Lobelia in cases of scabies. What was the result? Although fifteen years have elapsed, not a single clinical case has been published or related which proved Teste's recommendation of any value. Teste's recommendation, be it remembered, was based upon the supposed pathogenetic effects of Lobelia in causing itchlike vesicles in a single instance! A recommendation based on such insufficient grounds is not in accordance with the demands of our science. This is not the only instance in which Teste erred in a similar manner.

Since the appearance of his "Materia Medica" in this country, in 1854, I have carefully observed hundreds of cases of persons who were taking Lobelia, both in large and small doses, and I have never observed any eruption, coincident or subsequent, which could by any stretch of fancy be said to have been caused by that drug.

I have also made inquiries of truthful, observing physicians of other schools, who are in the habit of using Lobelia, and their testimony is decidedly against its power of producing irritation of the skin, when taken internally. Dr. P. H. Hale, who has had ample opportunity of observing its effects, states that with the intense nausea it causes, there is sometimes a *prickling-itching* of the skin; acting on this hint, he thinks he has seen benefit arise from its use in suppressed *urticaria, with nausea and vomiting.* This, however, would not prove its homœopathicity to any organic skin disease like itch. The intense itching caused by Opium is probably owing to its irritant action on the peripheral nerves; Lobelia causes its itching-prickling in the same manner.

For three years I used the Lobelia alone in many cases of recent itchlike eruptions, but never observed the least benefit ac-

crue, although I followed Teste's advice as to the potency to be administered. At one time Dr. Douglas recommended it in his lectures and writings.

Teste says he has used it successfully in a case of "papulous exanthem, evidently of a psoric origin."

Marcy and Hunt remark:

> It also operates upon the skin, curing a peculiar kind of herpes, formerly called "James River Tetter." It was common on that river, and cured by the Lobelia.

Lobelia has proved an antidote to Rhus tox. A lady in Massachusetts was severely poisoned. The usual allopathic remedies were applied: Lead water, Zinc, etc., but all to no purpose. The disease extended over both hands and arms, to the shoulders, and over the entire face, causing symptomatic fever and slight delirium. At 2 P.M., one drachm of the inspissated tincture of Lobelia was dissolved in one pint of water, and cloths wet in this were freely applied. At the first application the relief was marked; the smarting subsided and the redness disappeared. The cure was completed in one-half of the usual time of spontaneous cures. In the rapidly spreading erysipelas caused by dissection wounds, Lobelia is said to have effected several marked cures. Dr. J. S. Andrews, of Massachusetts, was severely poisoned, with two other gentlemen, on opening the body of an ox dead of a malignant disease. On the third day, the two companions died, and he had symptoms of the same disease, which produced spasms and every phenomenon that occurred in the other cases. Lobelia was used as a poultice locally, and also internally by enemas and by the stomach, in very massive doses. He recovered with sloughing of the wounded parts.

In two other cases of poisoning from dissection wounds, with a dynamic fever, and a rapidly extending erysipelatous inflammation from the seat of the puncture, it was equally successful.

Let us inquire into the sphere of action of this powerful drug. The direct action of Lobelia is doubtless upon the *nervous system*. Its whole force seems to be spent upon this system. Selecting the pneumogastric, about opposite the pharynx, as the starting-point, it passes in both directions, involving the phrenic, solar, and cardiac plexuses, and finally the cerebro-spinal system.

Nerves of Sensation.—This division of the nervous system is the first to note the introduction of Lobelia. That faithful sentinel, the *superior laryngeal*, telegraphs to the brain that a poison has invaded the system.

The pneumogastric being made up of both sensory and motor filaments, the impression passes down the extremities of that nerve, and the brain sends a motor current to eject the drug; while this is being done the sensation has gone on to the great sympathetic, and finally it is "felt at the finger ends and toes." The sensation is felt more severely in the solar plexus. The depression upon this and the other plexuses of the sympathetic system is such that the patient imagines that death is about to ensue.

The "healthy" feeling expressed by patients who have taken this drug, is due to the reaction. It is like the exultation of joy following the depression of fear.

I think this starting-point of attack is the key to the use of the drug.

Nerves of Motion.—This system is brought most powerfully under the action of this drug. The *inferior laryngeal* seems to be the first one called into action, which causes a constricted feeling at the larynx; passing over the œsophagus, contracts its whole length, then the stomach contracts from below upwards, and emesis follows; in the meantime the bronchi and breast contract, and the patient feels as if suffocation was impending. Now the voluntary muscles are called into action, and if the drug is carried far enough, convulsions and death ensue.

Muscular System.—As we have already seen, this system suffers severely, the whole nervous energies being brought so completely under control of this drug.

The involuntary muscular fibres are the ones first involved, as we observe by the vermicular motion of the muscular fibres of the œsophagus, the contractions of the stomach and bronchi, and the lowered action of the heart.

Want of power in the sphincter ani was cured in one case. (See last case under "Stomach.")

The voluntary muscles do not seem to be affected until the involuntary are completely under its influence.

In the reduction of luxations the eclectics use it much as we do

Chloroform to relax the muscular fibres, until the patient is as "limber as a rag." This is why it is of service in rigidity of the os, rigidity of the perinæum, intestinal intussusception, and in herniæ. It is not homœopathic to any such condition any more than is the vapor-bath.

The nerves of the heart are affected in the same manner as by Tobacco. Its primary effect is to paralyze, the secondary to cause spasms and pain. This shows why it is useful in certain cases of *faintness* (in a high dilution), and in *spasmodic palpitations and angina pectoris* (in low dilutions).

The nerves of the stomach are certainly most seriously affected by the specific action of the drug. I have frequently used it in *spasmodic cardialgia*, in *bilious gastralgia*, and even in the terrible pain caused by the attempted *passage of gall-stones*. In each of these disorders it should be used in the lower dilutions.

It is certainly homœopathic to *vomiting* with great prostration, cold sweat, feeble pulse, etc., but the records of our school show but few cases reported. It should be used *high* in such cases.

I believe it will prove as useful in the *vomiting from fright* and other emotions, in nervous subjects, as Gelseminum is in diarrhœa (involuntary generally) from similar causes.

Dr. Jeanes, one of the original investigators of the Lobelia, in our school, remarks he has been able to remove many dyspeptic symptoms with this drug. He considers the chief indications for its use are: *A sense of weakness and oppression at the epigastrium, and at the same time some oppression at the breast.* The nearer approach to these symptoms the less have I been disappointed. There are, however, some cases where although the symptoms of pectoral oppression are very trifling, yet this remedy operates satisfactorily. In a case of this kind, which I have but recently treated, and which occurred in a fat, robust man, about forty-five years of age, who complained chiefly of a copious hæmorrhoidal discharge, and consequent debility, and a sensation of tightness in the epigastrium with some acidity of the stomach, I at first gave him Nux vomica without any apparent abatement of his disease, and subsequently some other remedies with the same want of success. At length he complained of some oppression at the breast, for which I administered Lobelia $\frac{5}{6}$. The following day he informed me

that he felt new life and vigor, and that the pectoral, gastric, and hæmorrhoidal disorders had all disappeared since that time, now about two weeks; he has remained free from them, and also from a feeling of want of power in the anus and rectum, which was exceedingly uncomfortable to him while at stool, and to which he had been subject for many years.

The Lobelia does not have that debilitating action on the stomach, as an *immediate* effect, which other emetics cause. Most persons, after an emetic of Lobelia, can eat heartily and with relish. Its long-continued use, however, debilitates the stomach and weakens digestion. "Botanic" physicians consider it one of the best remedies for *dyspepsia*. They insist that small doses, five or six drops, one hour before meals, largely increase the appetite and power of digestion; but if the patient be bilious, an emetic dose must be given.

I have found it most useful in the *dyspepsia* due to excessive use of green tea, tobacco, and bad liquor. In such patients you will always find the *faintness at the stomach* a prominent symptom. If you consult the gastric and stomach symptoms of Lobelia, you will find quite an array of peculiar symptoms.

The following are the chief symptoms, according to Dr. Jeanes, which indicate the use of Lobelia:

Constant dyspnœa, aggravated by the slightest exertion, and increased by even the shortest exposure to cold, to an asthmatic paroxysm; sensation of weakness, and pressure on the epigastrium, rising from thence to the heart, with or without heartburn; feeling as of a lump or quantity of mucus, and also a sense of pressure in the larynx; pain in the forehead from one temple to the other; pain in the neck; pain in the left side; high-colored urine; weakness and oppression in the epigastrium, with simultaneous oppression of the heart.

Dr. Cutler (allopath) gives his case as follows:

It has been my misfortune to be an asthmatic for about ten years. I have made trial of a great variety of the usual remedies, with very little benefit. In several paroxysms I had found immediate relief, more frequently than from anything else, from the skunk cabbage. (Dracontium fœtidum, *Lin.*; Arum Americanum, *Catesby.*)

The last summer I had the severest attack ever experienced. It commenced early in August and continued about eight weeks. Dr. Drury, of Marblehead, also an asthmatic, had made use of the Indian tobacco, by the advice of a friend,

in a severe paroxysm early in the spring. It gave him immediate relief, and he has been entirely free from the complaint from that time. I had a tincture made of the fresh plant, and took care to have the spirit fully saturated, which I think is important. In a paroxysm which perhaps was as severe as I ever experienced, the difficulty of breathing extreme, and after it had continued for a considerable time I took a tablespoonful. In three or four minutes my breathing was as free as it ever was, but I felt no nausea at the stomach. In ten minutes I took another spoonful, which occasioned sickness. After ten minutes I took the third, which produced sensible effects upon the coats of the stomach, and a very little puking, and a kind of pricking sensation through the whole system, even to the extremities of the fingers and toes. The urinary passage was perceptibly affected by producing a smarting sensation in passing urine, which was provoked by stimulus upon the bladder. But all these sensations very soon subsided, and vigor seemed to be restored to the constitution, which I had not experienced for years. I have not since had a paroxysm, and only a few times some small symptoms of asthma. Besides the violent attacks, I had scarcely passed a night without more or less of it, and often so as not to be able to be in bed. Since that time I have enjoyed as good health as, perhaps, before the first attack. . . . . In all cases of which I have been informed, it has produced immediate relief, but the effects have been different in different kinds of asthma. Some have been severely puked with only a teaspoonful, but in all cases some nausea seems to be necessary. The asthma with which I have been afflicted, I conceive to be that kind which Dr. Bree, in his practical inquiries on disordered respiration, etc., calls the first species, a convulsive asthma from pulmonic irritation of effused serum. My constitution has been free, I believe, from any other disorder than what has been occasioned by an affection of the lungs, anxiety of the præcordia, and straitness of the breast, and other symptoms, produced by that affection.

Although Lobelia produces a kind of dyspnœa by its primary effect, it is not true asthma, but rather a difficulty of breathing from faintness and sinking at the stomach. The dyspnœa seems to come from the stomach, and not from thoracic or bronchial constriction.

The *asthma* which Lobelia has attained such a reputation in, is a purely *spasmodic affection* of the motor nerves which supply the bronchi, the larynx, and other portions of the respiratory apparatus.

It is a *secondary* effect of Lobelia, to cause just such a condition of the nerves of motion, as we find in the severer cases of asthma.

If anything was wanting to prove this theory, it is the fact that *appreciable doses are required to palliate or cure the affection.*

You may be able to relieve a primary dyspnœa like the one I just mentioned, with the sixth or twelfth dilution; but to relieve

a true asthma you will have to resort to the mother tincture or the first decimal dilution.

I have found that it is not necessary to vomit the patient in any case; nor is it necessary in all cases to cause nausea; and the majority of cases can be relieved without nausea. Begin with a single drop, and *increase* a drop every dose (repeated every fifteen or twenty minutes in bad cases) until the patient begins to breathe easy; then *decrease* the dose in the same manner.

In *spasmodic croup, asthma of Millar*, and other spasmodic affections of the throat, even in spasms of the larynx of hysterical patients, Lobelia is a remedy upon which you can generally rely.

In the country, and often in the city, it is always kept in the houses of the people, who look upon it as a panacea in all cases of croup. They give it on the first appearance of the stridulous breathing, ringing cough, and dyspnœa. These symptoms it always *relieves*, and if the attack is spasmodic it cures. But if it be catarrhal, or pseudo-membranous, it palliates only; and in the latter affection it does positive injury by depressing the vital forces, for it has no specific power over any inflammatory process involving the organs of respiration.

In domestic practice it is given in all kinds of doses, from a drop to a teaspoonful.

As a good illustration of the specific action of Lobelia in *spasm of the larynx*, I give a case reported by Dr. Knowles, of Avoca, Iowa:

> A young woman, after washing nearly all one cool day, exposed to sudden alternations of temperature, was seized suddenly with a paroxysm of coughing and choking. The constrictive sensation seemed to be in the locality of the larynx. In half an hour after the beginning of the seizure, the woman seemed to be dying, the dyspnœa was so terrible. A constant cough tormented her all this time.
>
> When I first saw her, about an hour after her seizure, she was gasping for breath, her face livid, and expressing the greatest anxiety. There was apparently but a few seconds' interval between the paroxysms. She could speak but a word or two at a time, and could swallow only at rare intervals.
>
> Any one who has ever witnessed a case of this distressing disorder, in an adult or child, has witnessed a scene of the most frightful suffering known, aggravated with an intense fear of death.
>
> In this case ten drops of the 2ˣ dilution was repeated every five or ten minutes, as I could get her to swallow it. She was relieved after the third dose, and had no spasm after the fourth.

This may be considered a rapid and brilliant cure; but such cures are often made with Lobelia.

In homœopathic practice, the effectual dose for croup will lie between a few drops of the tincture and a few drops of the second decimal dilution.

In diseases of the organs of generation of women it has not been used except in cases of labor, but the discovery of Ether has superseded its use in most cases. You may, however, find it of value in certain rigid or spasmodic conditions. Many country practitioners of our school value it very highly in slow or difficult labors from want of relaxation. Dr. Paine (eclectic) uses it to allay those *skirmishing pains* before parturition; to ward off threatening convulsions in approaching *eclampsia*. Where the old school resort to the lancet he uses an enema of Lobelia with happy results.

It is of much use in *rigidity of the os*, which often exists to the great annoyance of busy practitioners. The same dose (℥j or ℥ij, by enema) is here given, which not only relaxes the rigid os, but all the muscles of the body.

Rigidity of the Perinæum.—Often, says Paine, have I had to bring my instruments to deliver a patient (and the doctor, too) where this condition of affairs, the head thrust against the perinæum, had existed for hours, the attending physician using *teas*, *fomentations*, and *patience* without avail. A single enema of Lobelia has worked like a charm, relaxing the parts, and the child was born.

It is doubtful if Lobelia is primarily homœopathic to *any* of the above conditions, excepting, perhaps, the false pains before parturition.

The tincture in drop doses or more will have to be used.

You may have occasion to use the Lobelia in certain obstinate and annoying cases of *convulsions*. I allude to the *hysterical convulsion*. In the great majority of cases no attenuated remedy will arrest the paroxysm. The *cure* of hysteria must consist of a constitutional treatment for the removal of a cause. But the treatment of the paroxysm must be "short, sharp, and decisive." If a firm, decided, and imperative command does not arrest it, do not allow yourself to be kept by the bedside, hour after hour, as you

will be importuned to, but immediately give Ether, Chloroform, Chloral, or Lobelia. A teaspoonful of Lobelia has a magical effect in such cases. The nausea or vomiting, with its consequent relaxation, arrests the most violent hysterical spasm. If you cannot get her to swallow it, give it in an enema.

It is, however, homœopathic to many of the premonitory symptoms of hysteria, especially the anomalous sensations in the throat or œsophagus, the "globus hystericus," etc. I have often relieved such symptoms with attenuated doses.

Dr. Scudder, although in the eclectic school, is as good a homœopathist as the most of us, gives the following as his experience with Lobelia:

Recognizing the fact that it primarily causes great *cardiac depression*, he declares that in small doses it is a *cardiac stimulant*.

He says it is indicated in nearly all diseases where we find "*præcordial oppression, with enfeebled circulation; a feeble, empty, oppressed, 'doughy' pulse;*" a "fulness of tissue, with loss of elasticity;" or precisely such a condition as Lobelia causes when taken in large doses.

In *asthma, angina pectoris, cardiac neuralgia, uterine catarrh* (with swollen, flabby uterus), *agues*, and many other diseases, he finds Lobelia to be specific, if the above characteristic indications are present.

This is the true doctrine, and Dr. Scudder has hit the keynote of the remedy. His doses are rather large (five to twenty drops every hour or two), but he gives many cases illustrating the prompt curative action of such doses, without causing any "aggravations." Perhaps the same doses of the 1^{x} or 2^{x} dilutions would have done as well; but the *size* of the dose is a minor matter, provided the medicine *cures*.

MELILOTUS.

Sweet Clover.

This remedy is seldom used by the old school. The "Dispensatory" of Wood and Bache says that it was formerly used to a certain extent, but has since fallen into disuse altogether, except as an ointment or poultice. In King's "Dispensatory" it is spoken

of as having been used for whooping-cough, but its principal use is as an ointment for indolent ulcers.

Dr. G. W. Bowen, of Fort Wayne, Ind., says he finds it one of the best aids in his practice. The doctor made a proving of it, and obtained results showing it to be useful in the following: Mania. (In proving it one became so furious they were obliged to lock him in his room for twenty-four hours.) Loss of consciousness with gushing of blood from the nose.

It has cured many cases of *epistaxis* from acute congestion.

Severe headaches, where they are almost delirious from the pains; aggravated by motion; better upon lying down. The face is very red, showing congestion soon after taking the remedy; then, after a time, the face became pale. I have interviewed several who have used this remedy, with very gratifying results. It seems to be adapted to *headaches* of a periodical nature, where the pain is very severe, and sometimes will be in the forehead, then can be felt as it penetrates to the occiput. After a little time it will move back again.

This may prove a useful remedy in *coughs* of a harsh, spasmodic character, with a feeling of oppression as if they cannot get air enough, with soreness of the chest internally and externally.

Dr. Bowen cites the following case, showing its usefulness in affections of the chest:

Mr. Y. came to me with, as he supposed, consumption. Had suffered with a bad cough and severe pain in his chest, so severe he could not lie on either side. Old-school physicians had diagnosed consumption, and apparently correctly. On examination I found the soreness was in the pleurae, which were evidently very much thickened. I gave, while examining him, a dose of Melilotus, and before I got my selections put up he assured me he felt better and could breathe easier, so of course I continued the remedy. In six days' time he returned home well, and has remained so ever since.

There was of course no consumption in this case, as it would be impossible to cure that so soon.

Dr. H. R. Stout, of Jacksonville, Fla., in an article in the "Investigator" reports the following:

CASE I.—A gentleman had been subject to attacks of *neuralgia* for fifteen or twenty years, affecting the right side of the head, and causing almost complete destruction of the sight of that eye. The attacks were caused by fatigue, cold, or derangement of the stomach. The pain centred about the eye, and extended over the right side of head and neck, and left the scalp sore and tender to the touch. The pain during some of the attacks was agonizing in the extreme,

and the patient would become wild and furious with its severity. I had used all the usual remedies, including Morphine, at different times, but Aconite and Belladonna had generally rendered the best service. I first used the Melilotus last fall, with the effect of completely controlling the attack; and since that time, when taken soon enough, it has always checked or controlled it.

CASE II was a lady who for two months had suffered almost constantly from *gastralgia*, accompanied by vomiting and entire loss of appetite, or rather inability to eat from the suffering it occasioned. She had been subject to attacks of neuralgia of the stomach for about six years. The dorsal region of the spine was exceedingly sensitive, and the pain always proceeded from that point. She had always been under allopathic treatment, and for two months preceding my treatment had steadily grown worse. The proper remedies controlled the vomiting, and to a considerable extent the neuralgia, which came on at night more frequently, and was exceedingly severe. Sometimes she was hardly able to speak or breathe. The pneumogastric and solar plexus of nerves, with their branches, were the ones affected. I had been in to see her late one evening and found her suffering severely. Veratrum alb. seemed to control the attack, and I left her apparently improving. About two o'clock her husband came in great haste and said she was dying. While dressing I racked my brain to know what remedy I should give, and it occurred to me that Melilotus perhaps would help me through. On arriving at the house I found her convulsed with agony, almost breathless, cold extremities, and in a condition that demanded prompt relief. I prepared Melilotus 3x, and the first dose took effect, and in one hour she was entirely relieved and went to sleep. She was threatened several times after with a return of gastralgia, but Melilotus invariably checked it. A month has now elapsed since an attack, the longest period she has passed without suffering for a year.

CASE III was a gentleman who lately came from the North for his health. His nervous system was broken down from close application to business, and for two months he had suffered extremely with *gastralgia*. Reasoning that his physicians had given the usual remedies, I prescribed Melilotus, with the effect to materially control the attack, and as he expressed it, the remedy relieved him more and left him feeling better than anything he had taken before. He left here, after a stay of a week or so, for another portion of the State, since which time I have heard nothing of him. I furnished him with a quantity of the remedy, as he was unwilling to travel without it.

A peculiarity of Melilotus is that it appears to remove the soreness and lameness which frequently follow an attack of neuralgia.

MERCURIUS IODATUS CUM KALI IODATUM.

Double Iodide of Mercury and Potassium, HgK_2I_4.

This is a canary-yellow salt, formed by the chemical union of one equivalent of red Iodide of mercury and two equivalents of Iodide of potassium. It is freely soluble in water.

The most marked effects of this drug are upon the mucous membrane of the respiratory organs. It causes profuse discharge of watery mucus from the nose, throat, and deeper air-passages, with sneezing, coughing, and watering of the eyes. From the chemical composition of the salt it may be safely inferred that it has a profound action on the whole glandular system. The free solubility of the drug in water renders it readily removable from the body by the natural secretions. For this reason it is not liable to do permanent injury when administered in repeated doses, and is to be preferred on this ground to metallic Mercury or its insoluble preparations, which are known to remain in the system for many years after their administration.

The action of this salt on the mucous membrane of the air-passages is more marked than that of any other mercurial preparation. Every physician knows the difficulty of breaking up a common cold after the mucous membrane has become inflamed. My experience with this preparation for more than three years past has convinced me that it will cure catarrh with more certainty and promptness than any other remedy. Since introducing it to the homœopathic profession about two years ago, I have received numerous letters expressing their gratification at the results obtained. (L. Sherman, Milwaukee.)

MITCHELLA REPENS.

Very little is yet known with certainty of the properties of the Partridge berry. A fragmentary but suggestive proving by Dr. P. H. Hale, and a more extended proving by Dr. T. C. Duncan, are all we have in our school. The latter did not develop many characteristic symptoms. The drug is one of feeble power; quarts of the infusion are drank by the country people without any unpleasant effects observable.

This is what the eclectic authorities say of it:

It is said that the squaws drink a decoction of the plant for several weeks previous to their confinement, for the purpose of rendering parturition safe and easy. —KING.

It has long been a domestic remedy for uterine diseases and menstrual irregularities.

This remedy is peculiarly American, not being noticed or used by foreign practitioners.

Dr. King writes:

Partridge berry is parturient, diuretic, and astringent. Used in dropsy, suppression of urine, and diarrhœa. It seems to have an especial affinity for the uterus, and is highly beneficial in all uterine diseases. It appears to exert a powerful tonic and alterative influence on the uterus. Dose of the strong decoction, from two to four fluid ounces, two or three times a day. The berries are a popular remedy for diarrhœa and dysuria. It is highly recommended as a cure for sore nipples, used as follows: Take two ounces of the herb, fresh if possible, and make a strong decoction with a pint of water, then strain and add as much good cream as there is liquid of the decoction, boil the whole to the consistency of a soft salve, and when cool anoint the nipples with it every time the child is removed from the breast.

The Uva ursi, a near relation of Mitchella, has been proved to be a mild uterine-motor stimulant, similar to Caulophyllum, Eupatorium purp., Secale, Pulsatilla, etc.

There must be some property of this plant which has an action on the uterus. I would recommend it for *false pains, uterine irritability, scanty and delaying menses, dysuria, scanty urine* with *profuse sediment.* In urinary disorders it resembles Uva ursi and Chimaphila.

MYGALE LASIODORA.

This medicine is prepared from the virus of a poisonous spider found in Cuba. The species of the same *genus* found in the United States are supposed to be poisonous.

The symptoms obtained from provings and cases of poisoning show that it resembles in toxic effects the Tarantula. It deranges the motor side of the spinal cord, causing *chorea* and *choreic spasms.* You will find it useful in some cases of St. Vitus's dance, after Cimicifuga, Agaricus, Hyoscyamus, and Stramonium have been unavailing. One characteristic symptom of the Mygale chorea is that the patient is *quiet* during sleep and *worse* in the morning.

I have only used it in one case, but it was a case of many years' standing, and it did not seem to do much good.

The English physicians, however, have been quite successful with it.

By referring to the cases of Drs. Blake and Spooner, in volume i, "Materia Medica," you will get an idea of its power in chorea.

MYRICA CERIFERA.

The Bayberry is a near relation, both chemically and therapeutically, to Hydrastis, Berberis, Coptis, and Geranium. It contains *Berberina*, united with a very large percentage of Tannin. A study of the pathogenetic effects of these drugs will show them possessed of similar qualities.

The Myrica was first brought into use and notice as a medicine by Samuel Thomson. This man, although uneducated, had in him the elements of a great reformer, and had he had the literary advantage of some of his allopathic persecutors, would have done more for the advance of medical science than almost any other man of his day. He was born in Alstead, Cheshire County, New Hampshire, February 9th, 1769. Dr. Hollenbach declares that he was "one of the greatest and best of medical benefactors, whose crude system of practice broke the mysterious chains which had bound the people of America and Europe for about two centuries." Certain it is that Thomson was the first to publicly attack allopathy in America, and his attack may be said to be the first that shattered the foundations of that school, and made way for such scientific reforms as homœopathy. In every State of the Union the "Botanic" practice of medicine preceded the homœopathic, and broke down those legal barriers that allopathy had placed round her. The crude practice is now nearly extinct, or has been merged into "eclecticism."

Dr. Thomson observed that Myrica "has the power of disengaging the thick viscid secretions of the mucous membrane of the stomach." He named it "canker powder," and used it very extensively. It was the principal ingredient in the ever-famous "composition powder," with which many people tortured themselves, in preference to the calomel and bleeding of the allopaths. Thomson advised it in all discharges from mucous surfaces, especially in leucorrhœa, dysentery, and nasal catarrh.

From Rafinesque, I find that the Bayberry was used at an early day for "uterine hæmorrhages, hysterical complaints, palsies,

colics, and scrofula." He says the *leaves* are "pectoral, emetic, astringent, nervine, subnarcotic, cephalic, vermifuge, emmenagogue, stomachic," etc. "The *bark* chewed is a good sialagogue; made into a snuff it is a powerful errhine." (It forms the basis, nowadays, of all the "catarrh snuffs" sold in the country.) "The taste of the bark is acrid and stimulating; in large doses of a drachm it produces a *burning sensation and vomiting, sometimes diuresis.*"

Dr. Fahnestock announced in 1822 that it was a specific for typhoid dysentery. This valuable property has been confirmed. I have verified it on myself in diarrhœa, and on others in cholera morbus.

The wax procured from the berries is removed from them by boiling in water, upon the top of which it floats. It is a concrete oil, or fatty substance, of a pale green color, about the consistency of beeswax, but more brittle and not so unctuous to the touch, of a faintly balsamic and pleasant odor. It can be made into candles, and burns at a temperature of 109° F., emitting a pleasant perfume. It has also been used as a simple salve for cuts and ulcers; also as a vehicle for other medicines. One bushel of the berries will yield about four pounds of wax. When the properties of the medicine are fully understood, the wax may come into use as an external application when it is indicated.

Dr. Coe (eclectic) says: "While it possesses specific and decided therapeutic properties, it is entirely innoxious in itself." This assertion is preposterous! A medicine cannot have therapeutic action, and at the same time no pathogenetic effects. The Myrica cannot be taken as a food, and if not it is a poison, or an agent capable of deranging the normal action of the organism. The same writer says also, "With the exception of a mild diuretic action, it is never visibly evacuant, except in very large doses, when it sometimes proves emetic." If Dr. Coe would make an experiment, as did Dr. Walker, he would change his opinion relative to its "innoxiousness."

Among the diseases for which Coe recommends the Myrica, are: Aphthous affections of the mucous surfaces, scrofula, diarrhœa, and dysentery (but not until the morbid accumulations have been expelled and the functions of the liver regulated), jaundice, leucor-

rhœa, suppression of urine; also ulcers, chancres, fistulous passages, in all of which latter he advises the local application.

But perhaps the most remarkable feature of the Myrica is its power, in connection with Lobelia, of allaying false labor pains. The peculiar therapeutic property here manifested is the result of the combination. Neither will answer the purpose alone. As soon as the pains are ascertained to be spasmodic, place the patient in bed, and administer the following:

Myrica, 15 grains; Wine tincture Lobelia, one-half ounce; boiling water, one ounce.

Add the Myrica to boiling water, and after a few minutes the tincture of Lobelia. Exhibit at one dose, and repeat in two hours if necessary. This will seldom or never disappoint the practitioner, and rarely is a second dose necessary. It allays the pains, quiets the nervous system, and postpones parturition to the proper period. Delivery will frequently be delayed from one to four weeks, and the matured energies of the system will then insure a safe and easy accouchement.

I quote the above entire, in order that the homœopath may see what delectable mixtures an opposing school prescribe! How many women in the eighth month of pregnancy, threatened with premature labor, could bear such a dose! If Dr. Coe practiced entirely among the lowest order of people, he may not have seen dangerous aggravations. Yet how can we account for the fact that Dr. Wilkinson, of England, who is said to be a homœopathist, quotes this prescription with his *sanction* (!) Any physician who has ever seen a patient under the action of half an ounce of tincture of Lobelia, need not be told of the distressing nausea, vomiting, and prostration caused by that drug. Imagine it, then, given to a delicate woman threatened with premature labor!

Away with such vile polypharmacy and crude drugging. The second or third attenuation of Caulophyllin, Cimicifuga, Secale, or Aletrin, is all-sufficient in such cases.

This drug was proven several years ago by a Dr. Walker. Twice he brought himself under its pathogenetic influence, and its effects were characteristic and decided. An analysis of its symptoms will show that many of its old applications were according to the law of similars.

The head, nose, and throat symptoms show unmistakably its applicability to *catarrhal disorders* of those organs.

The gastric, intestinal, and hepatic symptoms were of the greatest

importance. At first there was *unnatural hunger, then indigestion, then jaundice,* with bronze-yellow skin, fulness of the hepatic region and abdomen; scanty, yellow, frothy urine; loose, mushy, clay-colored stools, destitute of bile; much debility, drowsiness, almost amounting to stupor. This jaundice appeared in both provings. A very suggestive fact occurs in this relation, namely, the statement of old botanic physicians that the Bayberry has cured many cases of "black jaundice." I have ventured the opinion, in my previous lectures, that the jaundice was from *suspended secretion,* and not from obstruction. I believe, however, that the Myrica is homœopathic to both. The astringent principle causes suppression, and the Berberina the catarrhal condition like that caused by Hydrastis.

The jaundice in this proving was not relieved by Podophyllum, Leptandra, Nux vom., or Mercurius, but was promptly cured by Digitalis, 1ˣ dilution. This remedy was selected because of the slowness and irregularity of the heart's action—an infallible indication for the use of that remedy in many diseases.

I would recommend you to try it in *chronic intestinal catarrh;* for *chronic, offensive, irritating leucorrhœa,* and all *profuse catarrhal discharges of long standing.* Its topical use should aid its internal administration.

It has a reputation in old *coughs,* with profuse expectoration and much irritation of the throat. It should be used by means of a spray or gargle, to *granulated eyelids* and *throat, and ulcerated mouth and throat.* In *diphtheria* as a local application it rivals Guaiacum.

In Dr. Farrington's comparison of Digitalis and Myrica, he says: "By diminishing the secretion of bile, both develop symptoms of cholæmia, drowsiness, stupor, languor, slow pulse, jaundice, yellow eyes, swollen, heavy lids, clay-colored stools, frothy brownish-yellow urine," etc.

In both we find indifference, sadness, irritability. Only Myrica has, "thinks himself better than any one else."

Digitalis causes serous or jelly-like secretions from the mucous membranes, *easily detached.* Aphthæ, stomatitis, with fetid or sweetish saliva. Myrica causes thick, vitiated mucous secretions, *difficult*

to detach. Stomatitis, with spongy gums, fetid mucus, mouth coated with an *adhesive coating, difficult to loosen.*

Both give weak, sinking feeling in the epigastrium after eating; Digitalis, specifically, *after breakfast;* Myrica better from rapid walking.

In *jaundice* Myrica has ash-colored stool, drowsiness, slow pulse, but increased in intensity; dull, aching liver; dragging in back; tongue dirty, yellow; catarrh of posterior nares. Digitalis differs in having clean tongue, or tongue covered with easily detached slime; pulse slower than the beating of the heart; hardness in region of liver; yellow in corners of eyelids.

Both cause palpitation while lying on the left side; constriction of chest; tickling cough, made worse by lying or by talking. But Myrica produces an audible pulsation (more like Chelidonium); Digitalis exhibits the quick but small pulse of the weakened heart, laboring under the superadded pressure of the body.

Myrica, with its slow but intensive pulse, shows the system temporarily weakened by blood poisoned with bile, health returning with the resumption of hepatic activity; Digitalis gives us an enlarged liver, made so by organic heart disease, the enervating bile but intensifying the weakness of organic defect.

MYOSOTIS SYMPHYTIFOLIA.

Dr. M. Funk, to whom belongs the credit of discovering and introducing this plant to our Materia Medica, gives it this name, and, for the present, we shall recognize it as a new species of the Myosotis. Dr. Funk writes:

The plant grows in low, marshy grounds, and also on high ground among the trees, and on the hillsides on rich ground. The stalks grow from one to two and a half feet high, either single or in bushes of from five to six.

The leaves are lanceolate, not slim; distinct median vein; smaller veins running out to near the edge of the leaf and branching from the median alternately, not anastomosing; both sides of leaf hairy.

Flowers grow on branching stems at top of stalk in small clusters, are very small, are whitish, or tinged with a faint red or blue shade. (A closer description I cannot give you from the dried specimen in my possession.)

The seeds are perfect globules, and covered with stiff hair, or almost prickles.

The root is at largest parts hollow, the pith seemingly having rotted; smaller ones woody and tortuous.

Dr. Delamater writes of it in "American Homœopathic Observer" as follows:

I have submitted a specimen to several distinguished botanists, among them Professor Babcock, of this city, who says it evidently belongs to the Myosotis family, and resembles the Arvensis more closely than any other, but the leaves are altogether too large for it; and he does not want to give an opinion without further investigation.

Professor Hale thinks that it belongs to the Myosotis family, and that it is the Arvensis, the large leaf owing to the rich ground from which it was taken. It may be a hybrid or cross, being changed, as we know many plants are, by locality, and by uniting or marrying (as it were) with some other plants of the same family growing in their near vicinity; or what I think is more likely, is an example of the well-known fact, that some plants, on changing localities, tend to form new varieties from causes not accounted for as yet.

I will give Dr. Funk's own report of his discovery and clinical experience:

During the winter of 1871–2 I was (in Evansville) called to a sick boy. On this occasion I saw a few dried roots lying upon the table, and upon my inquiring thereabout, the father of the patient, Mr. Graupner, informed me that he had gathered these roots two years ago in the woods near Evansville. He had learned the use of this really precious remedy many years ago in Germany from an old woman who had saved many human lives thereby, and also *his own*, after several skilful physicians had given him up and predicted his certain death within twenty-four hours.

He had been suffering over two months with a severe attack of pneumonia; had been bled, blistered, nauseated, narcotized, purged, and tormented in every possible way. He had coughed and expectorated such immense quantities of mucus and corruption that he was reduced to a skeleton, and was unable to find a minute's rest either day or night. His parents had then called an old woman, who had the reputation of having cured many such desperate pneumonias and pleurisies by a certain root. She had brought a quantity of this root, which was to be powdered, mixed with honey, and with unsalted butter, to be fried in a pan over the fire. This paste had to be eaten with a spoon. By following these directions, the patient's cough had within twenty-four hours nearly disappeared, and in a remarkably short time he had fully recovered. He is now a healthy and robust man.

Of course I was anxious to learn the name of this precious root. He called it "Schwarzwurz" (black-root), and his description of the plant convinced me, beyond doubt, that it was nothing else but our "Symphytum officinale," of which, however, we knew heretofore nothing more than its value for bone fractures.

After Mr. Graupner's emigration to Evansville, Indiana, he soon searched the surrounding forests for the "black-root," and imagined he had found it. He said he would never be without it; and he had with this *American* root already cured several just as desperate cases as his own, and many others in the *old* country. Only about two weeks before he had given to an old lady, suffering

with consequences of badly-treated pleurisy, nearly the whole balance of his supply of "Schwarzwurz," and only the few I saw upon the table were left to him. He willingly divided this little balance with me, which, as he suggested, would be by far insufficient for another case; but as I was convinced in my mind that only a truly *homœopathic* remedy could have such wonderful effects, and that *such a one* would do the same service in *small homœopathic doses*, and without the admixture of honey and butter, therefore I prepared this root partly in a decimal and centesimal trituration, and partly with alcohol and water in a tincture. I used this preparation in given cases, in doses of one drop or one grain, and checked thereby several times the most copious mucous expectoration of phthisical patients within twenty-four hours, after Stannum, Ipecac., and many other of the indicated remedies had utterly failed.

Dr. E. J. Ehrmann, to whom I communicated my experiences and gave some of the trituration, found the remedy equally effectual in many such cases. I will, however, by no means insist that I have thereby *permanently cured* cases of phthisis pituitosa of many years' standing, but I have *very materially relieved them*, and further experiments must teach us what we can expect from the remedy in *such* cases.

The following spring I requested Mr. Graupner to show me the place where he gathered the "black-root;" but I saw at once that only the large lanceolate *leaves* of the plant resembled those of the Symphytum officinale; but the *flowers* are entirely different, and resemble those of the "Vergissmannicht" (Forget-me-not, Myosotis palustris); they are, however, far smaller and less beautiful in shape and color than that. But the characteristic of the *genus Myosotis* is unquestionable; the name of this particular *species* I have heretofore not ascertained.

I have prepared a tincture of the fresh root, and have hesitated heretofore to introduce the new remedy to the profession, because I wished to try it first in some *desperate* case, *so that I could refer to my own practical experience.* This I am now enabled to do.

One case of neglected pneumonia (a young man of about twenty years of age, William King), in Mt. Vernon, Indiana, I cured last winter. The patient was without medical attendance until he was nearly dying from the copious expectoration, which was perfectly relieved within two days by grain doses of the first centesimal trituration of Myosotis.

The other case occurred with me in the beginning of the past month (October). A boy, William Downey, about fifteen years old, whom I had cured of typhus abdominalis by the usual remedies (chiefly Rhus and Bry.), *relapsed* after going several days to school (probably in consequence of intemperate eating), and lingered nearly three weeks, getting weaker and poorer from day to day; a very troublesome cough, sometimes dry, sometimes with scanty expectoration, wasted rapidly his life-powers away; profuse day and night sweats hastened the dissolution; the eyes and cheeks were sunken; nose pointed and whitish—a fair specimen of *facies hippocratica*, and for the indication of the last resort—Carbo veg., which, however, proved ineffectual, like all other previously applied remedies. The patient's mother and sisters were fully prepared for his death; and more for a hopeless experiment (since the expectoration was *not copious*) than with the real

hope of success, I administered the Tincture of myosotis, five drops every two hours.

The following morning I was prepared to find him dead. But lo! what a wonderful change had taken place! With bright eyes and smiling face he welcomed me; the cough had nearly abandoned him, appetite had returned, so that I had no need to give a good prognosis—this had given itself! Within four or five days the profuse sweats gradually abandoned him, and within one week recovery was perfect! and I hesitate no longer to recommend this valuable new acquisition to our professional brethren, for which purpose the present meeting of the Indiana Institute of Homœopathy offers the most appropriate opportunity.

Both Dr. Delamater, my associate, and myself have used it, but not with as brilliant results as Dr. Funk. The only published verification is by Dr. Cushing, in the "American Observer" for 1874, which I give you in full. He says:

Let me say a word for *Myosotis* in the East. In July, 1873, I was called to see Miss ——, aged about thirty. Found her sick in bed; said she was tired out from hard work in a shop; was emaciated, feverish, sunken cheeks, pale face, glassy eyes, quick pulse, bad cough, profuse expectoration of large grayish lumps, looking much like small oysters; loud mucous rattling; gurgling in both lungs; no appetite, and some diarrhœa.

Father died of consumption; brothers, sisters, and mother are tall, slim, and feeble-looking. Diagnosis: consumption. Prognosis: death. After two months' treatment she was able to walk around the streets. During the fall and winter the skin on her face and hands turned dark brown and thick, and looked like fish-skin without scales. In February, 1874, the skin had, without external applications, assumed nearly its natural appearance, and she was seized with convulsions, several in twenty-four hours—continuing for several days, very like puerperal convulsions. Another prognosis of *death*.

After this she improved somewhat, when she became insane, in May, without any apparent cause. She was God—all the God there was. She had died, been in her grave till she stank, then went to the third sphere, and had now returned, etc. Then she took a notion to drown herself; was quite violent at times, although greatly emaciated and feeble. After two weeks she became quite simple, then was better; still the same old cough followed her.

I had given a number of remedies, but more of Calcarea phos. than any other remedy. When I received pure Myosotis tincture, I began to give her the first decimal attenuation, at first, night and morning (as she did not like to change the method of taking her medicine), but after two weeks gave it her oftener, and I am happy to say that her cough is better, appetite improving, is gaining flesh, and looking and feeling better.

Another symptom I forgot to mention,—she has been unable to smell or taste anything for five years; but now, since taking the *Myosotis*, she can taste and smell quite well. She has not menstruated for two years, and I am waiting for that to return and complete the cure.

MYRTUS COMMUNIS.

This drug, although it has no proving, has a very useful sphere, but a very limited one. Dr. Hering first published an account of it in the first volume of the "North American Journal of Homœopathy," over twenty years ago.

The one characteristic symptom given as a guide to its administration is—"*Stitches in the left breast running to the shoulder-blade.*"

Whenever this symptom occurs, especially in *neglected pneumonia, phthisis pulmonalis, tuberculosis*, etc., the Myrtus is specific *i. e.*, it cures all the symptoms connected therewith; or, if the case is incurable, it relieves that peculiar symptom.

Dr. Wahle, of Rome, reports several cases of suspicious cough, with tickling and pain in the upper portion of the *left lung*, cured promptly by this remedy.

It is rather singular that this medicine has not been thoroughly proven. It might develop symptoms of such importance that it would rank with Rumex, Bryonia, and Phosphorus.

It has generally been used in the third dilution.

NAPULUS SERPENTARIA.

This indigenous plant is a good deal used in domestic practice, in the treatment of *diarrhœa* and *dysentery*. A fragmentary proving, of little value, is to be found in Vol. I. It may deserve further investigation, but I have never used it in my practice.

NAJA TRIPUDIANS.

The virus of the terrible cobra de capello has been partially proven by English physicians. The late Dr. J. R. Russell valued it very highly as a remedy in *diseases of the heart*. His opinion of its sphere of action is doubtless correct. He says: "Naja acts primarily upon the nervous system; especially upon the respiratory nerves, the pneumogastric, and the glosso-pharyngeal."

In this respect it closely resembles Lachesis, another serpent poison.

Dr. Russell considers Naja very useful in the acute stage of *rheumatic carditis;* and afterwards in *organic changes in the valves* giving rise to tumultuous action of the heart; violent, sudden throbbing, attended with endocardial murmurs. But the keynote for the use of Naja, according to Dr. Russell, is the *irritating, sympathetic cough* occurring in heart diseases.

It is useful, however, in many spasmodic, nervous *laryngeal disorders, nervous headaches, dyspnœa,* etc., and will prove a useful remedy in practice when indicated.

NITRATE OF URANIUM.

Nearly twenty years ago I happened to see a brief notice that a French physiologist had observed that in animals poisoned with the Nitrate of uranium the urine was found to contain sugar.

Having several cases of saccharine diabetes on hand just at that time, I procured, with considerable trouble, a few grains of the salt, and triturating up to the third, gave it to my patients. The results were so satisfactory that I published them some time after. This led to the use of the remedy, and my own favorable reports were confirmed. Afterwards several English physicians, notably Drs. Blake and Drysdale, made provings and experiments on animals with the drug. These experiments were published in an admirable monograph by Dr. Blake. The symptoms, as arranged by him, are to be found in Volume I, "Materia Medica," together with a brief enumeration of the curative results of its clinical use.

One unexpected result of Dr. Blake's experiments was the failure to find sugar in the urine of any of the animals poisoned with Nitrate of uranium! Nor was it found in the urine of the provers!

But it caused *albuminuria,* and in nearly every case (of poisoning) the kidneys were seriously affected. The urine was increased in quantity, and was voided more frequently.

Dr. Blake, in commenting on these experiments, says:

> The results put glycosuria quite out of the court, as a condition of theoretically calling for this medicine. He adds, however: It ought to be useful in Bright's diseases, and kindred renal maladies; in contracted kidneys with gastric disturbances; in irritable conditions of the renal plexus of the sympathetic. It seems singular that it should have cured cases of sugar diabetes, which it undoubtedly has done.

We cannot properly assert that a medicine will not cure certain diseases because the symptoms of those diseases are *not* found in its pathogenesis. We do not know that any drug has been *fully* proved. A more extended and exhaustive proving may evolve the very symptoms which we have looked in vain for.

The many cases of *diabetes* (saccharine and insipidus) cured by the Uranium, abundantly prove that it is useful in maladies of that nature.

But it has other curative powers. It ought to be useful in some cases of *neuralgic headache.* Dr. Blake says it will cure *ulceration of the mucous membrane of the nose.* It is indicated in certain kinds of *dyspepsia* and in *cardialgia.*

It caused *ulceration of the stomach* in three out of ten rabbits; this seems to be a specific effect, for it appeared even when the drug was introduced under the skin of the leg. The ulceration was near the pylorus; even in non-ulcerated rabbits, the mucous membrane of the pylorus was found diseased. Dr. Blake suggests its probable usefulness in *extensive cutaneous burns with ulceration of the duodenum.*

When we consider how generally severe irritations of the duodenum will cause hepatic derangements, does it not occur to your mind that some of the irritations of the liver which may be caused by Uranium might result in glycosuria?

I believe Dr. Blake does not mention the appearance of the liver in animals killed with this drug.

Dr. Drysdale reports a case of *ulceration* of the stomach cured by the Uranium; and another physician claims to have cured with it "*hæmatemesis* from *gastric ulcer.*"

Dr. Cook, of Buffalo, reports curing a case of *incontinence of urine* in a young girl who had been troubled from infancy.

You will find in Vol. I a brief *résumé* of the cases of *diabetes* cured by the use of Uranium, and I have given the authorities as far as possible.

Do not use the drug lower than the 1st centesimal or 3d decimal. Make or obtain a careful analysis of the urine of your patient before prescribing it, and watch the changes in the urine daily. In this way only can you gain definite knowledge of its value in renal diseases.

NUPHAR LUTEA.

The root of the yellow Pond-lily has been used in medicine by all nations.

According to Dr. Masters, quoted by Lindley and Moore, the Nuphar lutea is a native of England. He says:

The flowers have a perfume of brandy, hence the names of brandy-bottles, applied in some countries to this plant. The root-stalks, bruised and infused in milk, are said to be destructive to cockroaches, and when burnt to be particularly obnoxious to crickets. The leaves and roots have a somewhat bitter and astringent taste. The flowers are used by the Turks in the preparation of cooling drinks, like the sherbet. The leaf-stalks are traversed by a great number of minute air-cells, whose arrangement is the same in both organs. A small variety occurs in the north of Britain, also in Siberia, Canada, etc. It is sometimes considered as a distinct species, under the name of Nuphar minimus. The Nuphar kalmiana does not differ materially from this.

From the last remark it would appear that the last-named is but a variety, if it is not identical with the Nuphar lutea.

Medical History.—The ancient physicians, among them Dioscorides and Pliny, mention the depressing action of this plant on the generative functions. Among the physicians of the fifteenth and sixteenth centuries it was placed among their most valuable "antaphrodisiacs." No reliable experiments, however, were made or placed on record, in relation to its effects on the human system, until Dr. Pitet, a homœopathist, made a proving of the plant. This proving was made with the fourth, sixth, seventh, and eighth dilutions. Many of the symptoms elicited are characteristic, and ought to be important. Since the third edition of this work, however, I regret to record that but little clinical experience has appeared to add thereto.

The *sphere of action* of the Nuphar appears to be upon the intestinal canal, especially the lower portions, the generative organs, the cerebral nerve-centres, and perhaps the skin.

Dr. Pitet, referring to its intestinal symptoms, says:

In the chronological order of the symptoms, those which are seated in the digestive organs do not commence until a number of days after the disturbance had been manifested in the nervous functions. Their seat, so far as can now be judged, is in the lower part of the digestive canal. Thus the pains which accompany or precede the stools are principally seated in the rectum. The

appetite is not at all disturbed, still the strength is not renewed, nutrition languishes, the face becomes pale, the eyes dark-colored. The stools are sometimes soft, generally languid, yellow, most frequent between four and six o'clock P.M. It is indicated in acute or chronic cases of entero-colitis, when the aggravation takes place in the early morning, and generally in cases where there is depression of the virile functions.

CASE I.—Having administered a dose of Nuphar 6, for several evenings in succession, to a patient convalescing from typhoid fever, whose feeble state was aggravated by nocturnal emissions, these latter diminished in number from the first day, and gradually disappeared.

CASE II.—In another case I gave the drug to a man who for nine years had had involuntary seminal losses during sleep, at stool, and when urinating, with complete erections; he was pale and languid, and had been treated in vain, for several months, at the Hospital St. Marguerite, by Opium, Quinquina, and the pretended tonics.

The first evening he had violent headache, accompanied by vertigo, as if from intoxication, extending into a part of the night, with soreness, nausea, epigastric pains, and bitter mouth. The next morning general bruised feeling, as if he had been beaten with a club.

There is a connection between these pains and the bruised pains produced by Nuphar in the brain and thorax, which are sensibly aggravated by the shock of every step.

During the following evenings the patient, who was taking the remedy twice a day, experienced heaviness in the head, vertigo, as if from intoxication (similar, he declared, to those he had felt while taking Opium), and bitterness in the mouth. For a month he took the Nuphar at two different times. His paleness diminished, his general weakness disappeared by degrees, and his digestvie functions took a new start. At the same time the pollutions ceased, erections came on, accompanied by a decided propensity for the generative act, and before the thirtieth day of the treatment he was able to satisfy it with success and without fatigue.

CASE III.—M. B., aged twenty-eight, had had a morning diarrhœa for three months. He had to rise every morning, towards five o'clock, several times for the purpose of going to stool; never any colic. Bryonia and Sepia did no good in a fortnight; the diarrhœa continued of the same character, and the slightest error in diet aggravated it. Nuphar cured it rapidly.—Ibid.

CASE IV.—M. Louis B., aged twenty-one, professor of literature, had scarce returned from the country, towards the end of last autumn, when he was taken with a morning diarrhœa, with colic. Between four and six A.M., he had two or three stools, and commonly one in the evening. This state had lasted eight days. After the first dose of Nuphar, taken at night, the diarrhœa ceased.

CASE V.—M. L., aged forty-three, musician, had suffered three years from entero-colitis, contracted by excesses at the table, and venery, and domestic troubles. He had exhausted the resources of the old school and of quackery without benefit. When he consulted me, towards the end of last November, he presented the following case: Appetite good, sometimes excessive; frequent regurgitations of an acrid and corrosive taste; digestion slow; colic and rumbling every night;

awakened several times from five to seven, every morning, to go to stool, which was liquid or soft, yellowish, and either sour or fetid; the least excess of any kind produced an aggravation of this state, and generally obliged him to remain in bed for a day or two (ordinarily he was enabled to attend to his affairs); his sleep was agitated; heat in the palms of his hands; frequent pulse; at times a dull pain in the left renal region, which was sensitive to the touch. From the first doses of Nuphar he derived more benefit than he had previously experienced from any treatment, and in two months he was well.—Ibid.

CASE VI.—M. L., a jeweller, aged thirty-three, had had a diarrhœa for a fortnight, which obliged him to get up several times for stool, towards five or six A.M. He had no colic, but experienced burning at the anus, together with general depression. The diarrhœa ceased from the second day.—Ibid.

CASE VII.—M. B., aged thirty-seven, a wood-carver, consulted me on the twenty-seventh of last May. He had been sick for three months. His tongue was white, mouth pasty, and his stomach the seat of a painful sensation of weariness; digestion slow. He had a wind colic, principally early in the morning, with liquid or soft, sour-smelling stool. For several years the virile functions had been badly performed; he had tolerable frequent pollutions during sleep; constant itching of the scrotum and perinæum; small desire for coitus; infrequent and feeble erections; the diarrhœa, colic, digestive troubles, and general weariness were aggravated on the day succeeding sexual connection. I prescribed Nuphar, and eight days after the first consultation, the patient not coming to visit me, one of his friends told me he was better.—Ibid.

Dr. Shipman, of Chicago, says he has used the *Nuphar* successfully for ten years in painless morning diarrhœa.

Dr. Blaikie, of Edinburgh, in his "Clinical Experience with New Remedies," writes:

Nuphar was successful in some cases of obstinate diarrhœa, particularly when the attacks come on early in the morning, and were unattended by much pain or griping. The 2d or 3d decimal dilution seems to answer best.

The brain symptoms are peculiar, and you may find it useful in some headaches attending depressed conditions of the generative organs.

One of the provers thought it caused an eruption like psoriasis, but a careful study of the circumstances makes it doubtful.

The root of the *small* yellow pond lily is the one used, but the larger yellow pond lily is only a variety, and doubtless possesses similar properties.

NYMPHÆA ODORATA.

It is not strange that this beautiful and odorous flower should have been selected as an emblem of purity, and that the ancient physicians supposed it to have the power of repressing and entirely dissipating venereal desires and sexual power. It is said that the priestesses and vestals in temples devoted to the worship of Diana used to sleep on beds made of the odorous water-lily, in order to keep themselves chaste and pure. In later times, an infusion, syrup, or distilled water of the root was given internally for excited sexual desires. Even as late as the time of Culpepper it was advised in "nocturnal pollutions and amorous dreams."

Allopathic physicians have not made much use of this plant, except where they have borrowed its use in diarrhœa, leucorrhœa, etc., from domestic practice. Eclectics have used it to a greater extent, but their knowledge of its qualities is quite meagre.

King mentions its use in ulcers of the mouth and throat. He says:

"I recollect a lady who, several years since, was pronounced by several physicians to have *uterine cancer*, and which resisted all their treatment. She was permanently cured by a squaw, who gave her to drink freely of the decoction of a root, as well as to inject it into the vagina, which proved to be that of the white pond lily.

Nothing is said by any American writer in relation to its action on the functions of the sexual organs.

Dr. P. H. Hale informs me that he has prescribed an infusion of the root as an enema in many cases of acrid, corrosive leucorrhœa, supposed to be caused by ulceration. The tincture was given at the same time internally, and leucorrhœa was cured with surprising rapidity.

I have been informed by many women that they have cured themselves of an obstinate leucorrhœa by the use of an injection of an infusion of the fresh root.

If the root will act as a rubefacient when applied externally, it requires no stretch of imagination to believe it acts homœopathically as a topical application in chronic inflammation, erosion or abrasion of the vagina and cervix uteri. I conjecture that it acts

very similar to the lotions so popular in such cases with our school, namely, a mixture of the tincture, or Aqua calendula with Glycerin; or more nearly still, to Hamamelis, Calendula, and Glycerin.

In order to ascertain whether it had any influence in repressing unnatural sexual desires, I once administered the tincture of *Nymphæa* to an hysterical woman who was much troubled by amorous dreams, voluptuous sensations in the genitals, and uncontrollable flow of sensual thoughts. She took ten drops every three hours for a week, with no perceptible effect on those symptoms.

In the winter of 1865–6, one of the class in Hahnemann Medical College proved it under my direction, but no symptoms of sexual depression were induced during the experiment. If the drug had any effect it was to slightly excite the genital organs. The only noteworthy symptoms related to the urinary organs, lumbar region, and throat. It caused, apparently, some soreness of the throat in both experiments. This proving, however, needs to be substantiated by others before its symptoms will possess much value.

ŒNOTHERA BIENNIS.

Dr. J. S. Douglas, of Milwaukee, was the first to use this remedy in homœopathic practice. He has been quite enthusiastic in its praises in *cholera infantum* and in other water diarrhœas of children. The late Dr. Perrine reported some successful clinical experience in similar affections.

I cannot learn that any other practitioners of our school have had any success in treating bowel complaints with this medicine.

Dr. T. R. Nute, of Chicago, is now about the only physician who uses the Œnothera much. He regards it as a sort of panacea for "all the ills that flesh is heir to." He read a long paper, lauding its virtues, before the Illinois State Homœopathic Society, in June, 1874. The same paper, with some additions, was published in the "United States Medical and Surgical Journal" a few months afterwards.

I think Dr. Nute has a monomania in favor of the drug. As

it is a harmless one (*i. e.*, both the drug and the monomania), he may be allowed to keep them both.

At present, whatever virtues are actually possessed by the Œnothera are buried under such fulsome praise, and its position as a nostrum, that I do not think it worth while to try and rescue it.

Since the above was written this remedy seems to have attracted some attention in the allopathic school. I give the following testimony for what it is worth:

Œnothera Biennis in Mucous Inflammations.—Œnothera biennis, or evening primrose, which is indigenous to all parts of the United States, possesses valuable properties as a mild sedative and alterative in many diseased conditions of mucous surfaces, especially the gastric, intestinal, and vesical. It is useful in some forms of dyspepsia, particularly those accompanied by an irritable state of the stomach and of the bladder, as indicated by frequent vomiting and micturition. Having prescribed the remedy for eight years, I have been able to carefully note its effects, and am convinced it will be an important addition to our list of medicines. A brief history of a few cases will best illustrate its action.

CASE I.—A man, aged twenty-six, of active habits, had dyspepsia for five years. His most distressing symptom was an almost constant pain in the region of the bladder, with frequent micturition. He had been treated in various ways without benefit, and was more than once sounded for stone. He was given half a drachm of fluid extract of œnothera with a drachm of tincture of cinchona com. in water, just before meals, with immediate and permanant relief.

CASE II.—A gentleman who had been a dyspeptic for many years had suffered especially from frequent vomiting of food, distress after eating, and restlessness at night, which was aggravated by a desire to urinate. Half a drachm of the fluid extract, just before eating and at bedtime, promptly checked the vomiting, allayed the irritability of the bladder, and gave him refreshing rest at night.

CASE III.—Mr. M., aged forty, while convalescing from typhoid fever, was attacked with an obstinate dysentery, with severe tenesmus and frequent discharges of bloody mucus. For five days the disease resisted every known remedy, including Anodyne enemas, Calomel and Opium, Turpentine emulsion, etc. All other treatment was then discontinued, and twenty-five drops of fluid extract of Œnothera were given every three hours. The dysenteric discharges entirely ceased after the second dose, and the patient had a natural fecal discharge within twelve hours.

Dr. N. S. Davis, of Chicago, has recently found valuable results from this remedy. He says:

From my own clinical observation I am inclined to regard it as a mild but efficient sedative to nervous sensibility, acting more especially on the pneumogastric nerve.—"Quarterly Abstract of Medical Science," February, 1877.

Its chief value, I believe, will be found in typhoid fever, to the treatment of

which it is peculiarly adapted by its soothing action upon the intestinal mucous surface. I am convinced that it essentially modifies the inflammatory condition which precedes ulceration of Peyer's patches, and that its use may frequently prevent ulceration. The usual dose in typhoid fevers is from fifteen to thirty drops every three hours. There is no danger of an overdose, and I have known a tablespoonful of the fluid extract to be given every two hours, by mistake, till two ounces had been taken. In that case it seemed to revive the patient, after the manner of a stimulant, and I am not sure that it might not be advantageously given in large doses in some cases. The fluid extract of Œnothera is not incompatible in mixtures with any other medicine. Its flavor resembles that of cold tea, and it is acceptable to any condition of the stomach. It appears to be well worthy the attention of the profession, and the writer would be pleased to learn the results of its use in the hands of other practitioners.—JAMES F. SULLIVAN, M.D., in "Pacific Medical Journal."

ŒNANTHE CROCATA.

This is one of the most poisonous and deadly of all the plants which have their home in the temperate zone. It is a native of Europe, and I think of the United States, although our botanical textbooks do not mention it as indigenous.

Cases of poisoning occur very often, owing to the ignorance of the people, who mistake it for harmless plants of the same family, which it closely resembles.

In the July number of the "British Journal of Homœopathy" appeared an exhaustive study of the poisonous effects of Œnanthe, by Dr. Bloc. It first appeared in the "Art Medicale," and then in the "Dublin Medical Journal."

Allen's "Encyclopædia of Materia Medica" gives a pathogenesis of this poison, but it has been but little used, except in some cases of *epilepsy* and *puerperal convulsions*.

We will give, *in toto*, the result of all the post-mortems which took place.

Exterior Aspect.—Very marked rigidity of the corpse; the hand strongly bent, with *the thumb applied forcibly to the palm of the hand;* the nails bluish; livid patches of small extent on the front of the trunk; all the back part presented a tinge of deep purple except at the edge of the troughs, where the discoloration was redder, and the edges of parts submitted to pressure, where there was no discoloration; the scrotum and penis equally livid; the face too was injected and puffy; eyelids slightly apart; conjunctiva rather congested; pupils widely dilated; lips, gums, and ears tinged purple; tongue showing through the teeth and *bitten at the tip;* froth issued from the nostrils.

Nervous System.—An incision of the integuments of the cranium let out a great quantity of black and liquid blood. The veins of the pia mater, greatly distended,

form numerous arborescent patterns on the surface of the convolutions and in their intervals. The cerebral substance is strongly injected, especially the white matter. It is the same with the cerebral protuberance and the medulla oblongata. Serous effusion pretty abundant in the cellular tissue, under the arachnoid and the ventricles, and principally at the base of the cranium. The sinuses of the dura mater distended with a great quantity of fluid blood. As to the spinal cord, its membranous sheath is strongly injected, the vertebral tissues are full of black fluid blood, and the medullary substance is redder and more congested than usual. In one case (Jones, who died in an hour) we found beneath the pia mater an escape of blood which covered both hemispheres.

Respiratory System.—The epiglottis is the seat of a very deep discoloration, with considerable injection of the network of veins covering it. The glottis, the ventricles of the larynx, the larynx itself, the trachea and bronchi, even to their ultimate ramifications, present a deep red, and are coated with a thick layer of reddish frothy mucus. The lungs are dull and blackish. A great many small extravasations (pulmonary apoplexy) were noticed.

Circulating System.—Heart: bulk normal, but contained much black fluid blood.

Digestive Apparatus.—The papillæ at the base of the tongue turgid and vascular. The velum palati, tonsils, and pharynx coated with glairy mucus and deeply livid. Œsophagus the same. Stomach and intestines scarlet inside. Interior surface coated with viscous mucus, under which the mucous membrane is strongly injected and looks mammillated, owing to the numerous follicles which are prominent and swollen. There are also points of extravasation and black lines along the venous trunks of these organs.

The report of these six post-mortems contains the substance of many others, which, being made much less carefully, we omit as useless.

MORBID ANATOMY.

We report verbatim this chapter, as a *résumé* of the alterations observed in several post-mortems, of which we have given but one, which was more extensive than the rest, and because it comprehends the post-mortems made on animals.

External Appearance.—Strongly pronounced rigidity of the body; hands strongly clenched, *the thumb forcibly applied to the palm.* Face livid, sometimes injected, but rarely; pupils widely dilated; reddish tinge of the body, especially marked on the parts lying undermost; scrotum and penis livid; abdomen tympaniti c.

Digestive System.—Trismus very difficult to get over (a constant symptom). Labial mucous membrane red, with ecchymotic spots, varying from bright rose to gangrenous black; bloody foam at the nose and mouth; velum pendulum palati, the two columns and back of the fauces, red, injected, and also exhibiting brown spots; glairy ropy mucus almost always present. *Tongue bitten at the tip* (constant symptom). Papillæ on the base of the tongue turgid and vascular. Gums purplish-red. Œsophagus, nothing exterior, vinous-red tinge on the interior; ropy mucus, red and brown spots. *Stomach.*—When death supervened rapidly, nothing at all was found in the stomach. This is the exception. Most frequently it presents a more or less deep tint of red; its mucous membrane is

mammillated, and its follicles prominent and tumid. The pyloric and cardiac orifices very bright red; their mucous coat raised, œdematous, and can be raised with the handle of the scalpel. If the subject has been long ill there is softening of the parietes of the stomach, and wide ecchymotic spots capable of proceeding to perforation. The stomach is generally empty; sometimes contains *débris* of the root, or a *milky yellow juice*, or else dirty-gray; in which, with a lens, one can find little drops of the gum-resinous juice, or the fecular grains of the poison. It is sometimes tympanitic, and the contained gas has the scent of fried celery, which characterizes the Œnanthe. In the large intestines the vessels are injected, with broad ecchymotic spots, distended, and mostly empty. The small intestines almost always contain the *débris* of the poison under the appearance of a yellowish matter in the jejunum, browner in the ileum. *Liver* normal; the gall-bladder flabby and mostly empty. *Spleen and Pancreas.*—Nothing special. *Kidneys.*—Marked injection of the cortical coat; very little urine in the *renal pelvis.*

Nervous System.—Effusion of bloody serum and sometimes of blood at the occipital foramen. On cutting the meninges the veins of the pia mater distended and highly arborescent at the edges of the convolutions; apoplectic foci in the cerebral mass, which is strongly injected and speckled (piqueté). The annular protuberance, medulla oblongata, and peduncles of the cerebrum and cerebellum inflamed, and present (especially the latter) a certain degree of softening. Serous effusion in the cellular tissue beneath the arachnoid, the ventricles, and at the base of the brain. The sinuses of the dura mater are distended with blood. *Spinal Cord.*—The integuments strongly injected; the vertebral sinuses filled with blood, soft and fluid. Medullary substance red and congested.

Circulating System—Heart.—Bulk normal; sometimes serous effusion, due to pericarditis. Heart always gorged with black blood, containing fibrinous clots; left side generally bloodless; there exist also brown spots on the parietes of both sides of the heart; the large vessels contain black blood quite fluid.

Respiratory System—Larynx, Epiglottis.—More or less deep coloring of the mucous lining, with more or less injections of the venous network which covers it. It contains a frothy, whitish fluid. *Trachea.*—Injection; bronchial glands gorged. *Lungs.*—Bulk normal, generally crepitant, presenting some *petechiæ* and *nucules* of pulmonary apoplexy; bronchi sometimes gorged with thick mucosities. The vessels are filled with black blood, liquid and ropy. Some obstruction was also ascertained at the back, but this, we think, was the result of incipient decomposition.

In short, the symptoms produced by poisoning with *Œnanthe crocata* are as follows, according to authors in general and Dr. Bloc in particular. The attack presents two forms: first, sudden; second, consecutive.

1. Some minutes after swallowing it the subject utters a cry and falls a prey to convulsions. 2. These symptoms do not appear again for about an hour. *Local Symptoms.*—Some time after ingestion spots appear on the hands, face, and limbs; at first rose-colored, then becoming deep-red, like the stings of *Urtica urens.* This eruption may extend over the whole body; it is preceded and accompanied by a sharp itching. In about two days the redness abates, the eruption decreases, leaving a scurfy desquamation. But the progress of this eruption is not always so

gentle. The dermis is inflamed, the glands are gorged, and there appear shortly signs of a phlegmon, which runs its usual course, ending either by resolution or suppuration. Observe that this eruption sometimes shows itself in subjects who are poisoned, but especially from the application of the juice on the hands.

General Symptoms.—1. Regarding the nervous system: shivering at the outset, and horripilation; loss of consciousness and of memory; agitation, brisk, shaking, and intermittent, or rather with remission; acute cries; delirium, more or less prolonged; stupor, vertigo; convulsive movements of the muscles of the face, jaws, and limbs; sometimes opisthotonos. Well-marked trismus, proceeding from mere cramp to impossibility of opening the jaws, or having them opened by force. Dilated pupils, contraction of the muscles of the eyelids, spasms of the muscles of inspiration, fainting fits, sometimes horrible convulsions, followed by general insensibility and death. We rarely observe hallucinations.

2. As to the alimentary canal: an acrid sensation, biting and burning on the tongue, mouth, and fauces; sensation of constriction of the pharynx. Appearance of red and brown spots on the parts directly in contact with the poison. Bloody froth at the nose and mouth. Tongue projecting and almost always bitten. Acute, burning pain of the œsophagus, stomach, and intestines; pressive pain in the epigastric and abdominal region. Nausea, efforts to vomit, with or without effect. Virulent smell of fried celery. Loss of appetite. Obstinate constipation or frequent stools.

3. As to the circulatory and respiratory symptoms: irregular beating of the heart; small pulse, and threadlike; respiration short, with long intervals, and sometimes appearing to cease entirely. Brisk expirations are made from time to time to expel masses of bloody mucus.

4. As to *secretions:* at first, cold clammy sweats, then dryness of skin. *Excretion of urine:* in general there is retention, and very little is passed each time.

Of all maladies epilepsy has most resemblance to poisoning by Œnanthe; but epileptic attacks last on the average ten or twenty minutes, whereas the sufferings produced by the poison are of long duration, extending beyond eight hours and even for days and weeks. In epilepsy the trismus never lasts longer than the fit, and is not always present. In poisoning cases it not only appears during the general attack, but lasts very long, even so as to prevent emetic treatment, from impossibility of introducing liquid into the mouth, and they have to inject it by the nostrils with the œsophagean catheter. Out of 124 poisoning cases whose phenomena have been recorded in this work, there were fifty-five deaths.

As a result of all the cases of poisoning and pathological effects, it is the opinion of other authors, and of Dr. Bloc himself, that Œnanthe crocata, and *especially the root,* gives rise in man to all the symptoms of epilepsy. According to experiments on animals with the fresh juice, or aqueous or alcoholic extract, or even with the tincture in small doses, it provokes in them, also, symptoms analogous to those of epilepsy. The lesions of the dead body, ascertained by post-mortem examination, present in each case precisely the same alterations. From this similitude of symptoms ascertained during life, and of the organic lesions found after death, may we not hope that this plant can be administered beneficially to epileptic subjects? This is what we wished to try in the case of one of our dispensary patients. This young man, about 22, presented frequent epileptic vertigo,

and sometimes biting of the tongue and involuntary urine during the fit, with total oblivion of all that had happened during the crisis. We prescribed for four months Œnanthe, from the 6th dilution to the "mother tincture," in drops. Sometimes we observed retardation of the attack, which, from fortnightly became monthly, and retardation and diminution of the vertigo. But at other times the vertigo and fits reappeared as often and as intense as ever, though we could not positively prove that the strong doses produced aggravation. This patient left off coming. I ought to add that, having taken his medicine from a druggist's shop where I was not *quite* sure that they had the mother tincture of Œnanthe crocata, and not from Messrs. Catalan, where I had verified its presence, I cannot feel certain as to this experiment.

OLEUM SANTALUM.

This oil is extracted from the wood of the *Santalum album*, a tree growing in the Indies, China, Hindoostan, and Ceylon. In "A Materia Medica of Indian Drugs," published in 1826, in London, written by Dr. Ainslee, who was of the Medical Staff of Southern India, I found the following account of its uses. He says:

Sandal-wood in powder is prescribed by the Vytians in "ardent remittent fever," from its supposed sedative and cooling qualities; they look upon it as a valuable medicine in *gonorrhœa*, given in cow's milk (a virtue that it is considered to possess by Rumphius). In cases of morbid thirst it is recommended to be taken in cocoanut-water, and in hot weather, after bathing, the powder is rubbed over the body, equally to cool it and check a too copious perspiration. The Mahometans are in the habit of preparing, with the most yellow and finer parts of the wood, an oil, which they value highly as a perfume. The yellow is the inner part of the tree, and is of great hardness and fragrance, particularly near the root of the tree; the white is the exterior part of the tree, is less firm, and has but a faint odor.

Perfumes from this wood, says Lourerizo, are highly esteemed by Eastern nations, being useful remedies, they suppose, in vertigo, palsy, and restraining vomiting and fluxes. The Arabians place Sandal-wood among their class "*Cardiaca.*"

Our knowledge of the virtues of this agent came to us through East Indian physicians or travellers in Asiatic countries. The general testimony is to the effect that it is considered very useful by native physicians in the East for all affections of mucous surfaces, especially those of the respiratory and urinary organs. You will find no mention of it in the allopathic textbooks, although

it is used very extensively by that school in the treatment of *gonorrhœa*. Probably the reason why they do not mention it is because the vendors of quack medicines seized upon it and prostituted it, just as they have done with Buchu and many other important medicines.

I look upon the Oil of sandal-wood as a very valuable medicine. It is analogous in effect to Copaiva, Cubebs, Erigeron, Turpentine, Stannum, and perhaps Sepia and Pulsatilla. We ought to have provings of this oil, but none have been undertaken.

I believe that in the treatment of gonorrhœa, or any catarrhal state of the urinary passages, it is superior to the above-named medicines *in many cases*. We cannot give definite indications for its use yet; and the only indication I can give you is this: It is useful in cases when the apparently indicated remedies have been used with little or no benefit, the discharge continuing in *large quantity, and is painless, thick, yellow, or green*. I sometimes give it for these symptoms before I try Copaiva, Cubebs, or Erigeron, and after the inflammation, pain, and scalding have been removed by Gelseminum and Cantharis or Cannabis. My usual dose is a drop or two of the pure oil, or ten drops of the 1^{x} dil., or a few grains of the 1^{x} trit., every four or six hours. Allopathists prescribe it in capsules, each containing fifteen or twenty drops, three or four times a day. They consider it necessary to combine it with Oil of cinnamon, to prevent "nausea and gastric derangement," vomiting, and other morbid conditions of the stomach, the exact character of which provings only will show.

I have found it curative in one case of *catarrh of the bladder*, and in another where some disease of the kidneys had existed for years, characterized by a peculiar white sediment in the urine. It removed this symptom while the patient was under its use for a *gleet*, which it also cured.

I expect it will be found useful in *old mucous coughs*, in *laryngeal and bronchial catarrhs*, and probably in some *uterine and vaginal discharges*.

A recent writer on allopathic Materia Medica cautions against giving too large doses of Sandal-wood oil, "for," he says, "it has been known to cause *very painful aching of the back and loins, such*

as is present in many serious renal diseases." This, then, may be set down as a characteristic symptom. In a few cases of renal disease of an obscure character, when other medicines did not act well, the above symptom was removed by Oleum santalum, 2ˣ trituration.

OLEUM CAJUPUTI.

This odoriferous oil has not been used as a medicine in homœopathic practice except by a few physicians.

The pathogenesis in "Symptomatology" was made up from provings made by Dr. E. C. Parsons, then a student in Hahnemann College, Chicago. This, together with a proving by Dr. Ruden, which I overlooked (but which is appended hereto), are the only provings I have found.

I have named its analogues hesitatingly, for not sufficient is known of it to justify us in estimating with precision its sphere of action. It seems to resemble in its effects Cocculus, Asafœtida, Camphor, and Valerian.

I have often called your attention to the fact that provings of any drug will show that the cures heretofore made with it, in any practice, are homœopathic cures.

The Oil of cajuput has cured *nervous vertigo, headache, nervous vomiting, dysphagia, spasmodic stricture of the œsophagus, hiccoughs, flatulent colic, suppressed menses, epilepsy, hysteria, paralysis* (probably hysterical), and other nervous affections.

The fragmentary provings we possess show that vertigo, stricture of the œsophagus, vomiting, hysterical symptoms, are among its prominent pathogenetic symptoms.

I once prescribed it in a case of *spasmodic hiccough*, after an attack of apoplexia nervosa. It relieved in a few minutes, in doses of five drops of the 1ˣ.

In one case of persistent "sensation of choking in the throat," a few doses removed the symptom, which had lasted several weeks.

Dr. H. N. Martin, commenting on Dr. Ruden's proving, says:

The white, moist, sour-bitter, rough tongue in the morning, with sensation as if scalded, and *no thirst*, reminds us of Pulsatilla; so also does the position of the

arms when sleeping. Sadness and downheartedness, with disposition to cry, and the peculiar desire for food, with disgust at it when brought to him, are all similar to Pulsatilla. If the eruption, like measles, was the result of the proving, it ought to divide the palm with Pulsatilla in the treatment of that disease. Other symptoms will be recognized which are quite similar to Baptisia, especially the symptom, "felt as if I could not get myself together." Several of the symptoms are also similar to Natr. mur., especially, "he does not want to be spoken to." It ought to be valuable in the treatment of *typhoid fever*.

I agree with Dr. Martin, and predict that it will relieve the *tympanites* in typhoids.

DR. RUDEN'S PROVING.

August, 1869. Weather warm and dry. The experimenter being in a healthy condition, and all the functions of the body normal. Temperament lymphatic. Pulse, 72.

August 10th, A.M. Took 5 gtts. Burning in the throat down to the stomach; pain in the right lung. After four hours: erections, with great desire for an embrace. After five hours: intense itching, aggravated by scratching, lasting two hours. Sleep, with amorous dreams, without emissions. At 12 o'clock (midnight) on rising in bed, stitching pain through both knees, lasting a quarter of an hour (never had such pains before). On going out of doors at midnight could not see; rubbed his eyes to bring sight. Wanted to sleep with his arms locked under his head for the first time.

August 12th, A.M. No appetite; tongue moist, feels as if scalded, looks white and rough; pulse, 70; sensation as of burning in the face (had same sensation last night). On retiring at night sleep full of amorous dreams. Was called at midnight, and on rising passed water freely. After visiting my patient, retired again and slept soundly until 6 A.M.

August 13th, 8 A.M. Took 7 gtts. After ten minutes: sticking pain above the orbital arches, relieved by pressing the hand on the parts; worse on removing the hand. After one hour: soreness across the chest, with pain in the left shoulder; sensation in the arms as if they were tied to the body, especially in the left one; feel cold, and cold sweat all over the body; no thirst and no appetite; pain across the chest.

12 P.M. Took 10 gtts., followed by nausea and pain in the right side below the ribs.

6 P.M. Pain over the left eye and through the left malar bone. On going to supper it was with great difficulty that I could walk, from weakness and pain in both knees. Went to bed without supper, and was better on lying down. Was called at 10 P.M. to go in the country; felt as if I could not get myself together, and could not find my clothes for some time, although they were quite near; better in the open air, but on riding my lungs felt as if they were loose, and that I must hold them together by pressing on them.

August 14th. Passed water this A.M. at 6 o'clock, the first for thirty hours.

The urine is dark-red, and smells like that of cats. Very (uncommonly) profuse and weakening sweat. Felt very much offended on being called last night.

9 A.M. Joints feel enlarged, with some pain; same kind of pain in both shoulders. Feel all over as if I had been poisoned. Taste in the mouth between sour and bitter; much water in the mouth; want to spit a great deal. Always had salty taste, *now* have sweetish taste. Smoking tobacco makes me feel like vomiting. No appetite; have eaten nothing since yesterday.

12 P.M. Some appetite, but when I get what I had previously desired, then I do not want it. Feeling as if I did not want any one to speak to me.

August 15th, 9½ A.M. Took 10 gtts. Tongue looks white and rough; feels as if it were scalded, and as if the skin would peel off; it looks like a calf's tongue; pulse 74, languid. "He looks around the eyes as if he had taken too much liquor" (Dr. Moore). I was met by an old acquaintance this morning who asked me if I had not "been on a drunk." On looking down, my nose is most prominent; it looks as if it were large and extending out from the face.

11½ A.M. Feel sad and downhearted, as if I could cry; do not want to be spoken to; feel better in the society of ladies; do not like to talk with the men, but can laugh and make free with the women (am naturally bashful). Left arm feels as if it were out of joint; cannot raise it without pain; pressure on the inside of the shoulder-joint gives sharp pain, which seems to act most on the left side; pain in the right eye. On riding into the country last night had griping pain in the bowels.

August 16th. While taking the medicine I was costive, but now have diarrhœa, watery, yellowish, with itching around the anus; no pain; feel tired and sleepy. Diarrhœa by day, *and worse by night;* bowels moved about ten times; no appetite or thirst.

August 17th. An eruption has made its appearance as thick as measles, all over the arms and body and upper portion of legs. Frontal headache, worse on bending forward, especially in the eyes.

OLEUM RICINI.

This oil is extracted from the seeds of the *Ricinus communis*, or Castor bean. It has been in use as a laxative and purgative ever since its discovery.

I have collected and arranged in my "Materia Medica" the symptoms caused by the seeds when eaten and from the oil. It is evident that the whole seed, if eaten, is narcotic and poisonous, but the oil, purified as it is by the process adopted to fit it for commercial and medicinal uses, cannot cause the serious symptoms produced by the whole seed.

The most that large doses of the oil can do, when taken internally, is to irritate the coats of the bowels sufficiently to cause nausea, griping, with loose, feculent, or papescent stools. If its

use be continued, especially in children, it causes slimy and bloody stools, with tenesmus.

You are aware that the favorite treatment of dysentery, with many allopathic physicians, is to give small and repeated doses of Castor oil; or one larger dose (a tablespoonful) in the beginning of the attack, "guarded" by some preparation of Opium. This plan is often quite successful, and it is doubtless due to the homœopathicity of the oil to enteric irritation.

Several physicians of our school inform me that they rely upon Castor oil in doses of ten or fifteen drops, repeated every few hours, in mild cases of *dysentery* or acute mucous enteritis.

For several years I have used a preparation of Oleum ricini—the 1ˣ trit.—made by triturating one drachm with nine of Sugar of milk.

In the diarrhœas of children, when the evacuations are feculent, papescent, or slimy and bloody, or all these varieties combined, without fever, thirst, or much pain,—only a little griping and tenesmus,—this preparation of the Oil, about ten grains every two hours, often acts very satisfactorily.

For therapeutical observations on the leaves and seeds of this plant, see "*Ricinus communis.*"

OLEUM JECORIS ASELLI.

The formal introduction of the Cod-liver oil into homœopathic therapeutics was due to the venerable Dr. Neidhard. When his papers relating to this medicine first appeared in the "United States Medical and Surgical Journal," they were received with indifference by some and incredulity by many.

It had been suggested by a few in our ranks that the fact of the presence of some of the "antipsorics" in Cod-liver oil, in very minute quantities, was what gave it its real value in certain diseases of a chronic (psoric) character. It cures the same class of diseases for which we prescribe Iodine, Bromine, Phosphorus, Phosphoric acid, and Calcarea, and the oil is said to contain all these substances. The quantity of each substance is so minute that the oil may be said to represent a *high* potency of them. Even the Iodine never exceeds one part in two thousand.

It has been taught by allopathists that the oily principle alone was what gave it its value, for they asserted that the medicinal constituents are too minute in quantity to be of any value in disease. But many experiments, made with great care, have proved that no other oil, or even Glycerin, has the same curative action in disease. They may fatten, but the disease itself goes on unchecked.

The same failure to cure diseases occurs with Cod-liver oil when it is given indiscriminately. If the diseased organism does not call for its constituents *and* the oil, *it will not cure.*

In other words, *it must be selected according to the law of similia.*

The totality of the symptoms for which it is prescribed, must be covered either by the *Iodine* alone, or by Iodine *and* the other remedies it contains.

It is not the oil *alone* that corresponds to the *emaciation,* which is said to be one of the keynotes for its administration. The emaciation must bear a resemblance to that caused by Iodine and Phosphorus.

If it is asked, could we not successfully imitate Cod-liver oil, by adding to Glycerin, or some oil, the medicines above named? I reply, No, for this contains many acids, besides certain biliary principles, which make it a very complex substance, which it would be almost impossible for the chemist to imitate.

Dr. Neidhard, following the fundamental law of our school, instituted provings of Cod-liver oil, and watched closely its effects on the sick, even when given in small doses.

The results of his investigations prove that it should be treated as any other remedy, namely, selected according to one law, and given in small doses.

I will try and give you some *general* indications for the selection of Cod-liver oil. After which I will mention certain diseases in which it has been found useful. For the special symptomatic indications I refer you to the pathogenesis in the first volume.

One of the most important indications for the use of Cod-liver oil is the presence of *anæmia,* under which term I include all conditions of the blood where there is a deficiency of red globules.

This *anæmia* must not be the result of *losses* of blood, or that chlorotic anæmia which is accompanied by an anasarcous condi-

tion, or *without* emaciation. I doubt if the oil will prove of any benefit in *leucocythæmia.*

We are therefore restricted in the use of the *Aselli* to those cases of anæmia *not due* to hæmorrhages, cancer, renal diseases, or chlorosis. The anæmia must be caused by (1) want of proper nutriment; (2) conditions which prevent nutriment from being converted into healthy blood (diseases of the liver, digestive apparatus, stomach or intestines, especially mesenteric diseases); (3) conditions which tend to deteriorate the blood, namely, scrofulosis, tuberculosis, etc.

It has been shown by eminent authorities that the proportion of red globules is materially increased in patients to whom the oil is given for any length of time. In speaking of the *dose* I shall refer to this fact again.

Another important general indication for the use of Cod-liver oil is that condition of system in which, with general lowered tone, there is a tendency to cellular hyperplasia; to the formation of exudations composed of imperfectly developed cells, which, in the great majority of cases, from the very beginning are incapable of development into perfect entities, having only one potential quality, that of dying. There are various types of this diathesis or condition of the system. In one of them there is a tendency to increase in the lymphatic glands, to multiplication at the expense of development of their cellular elements, *i. e.*, to the formation of numerous imperfectly developed cells, and, finally, to the destruction of them. The death of the cells is partly due to their inherent qualities, and is partly the result of the pressure which they exert on one another, and upon their sources of food-supply. If they undergo a slow fatty degeneration, with desiccation, cheesy deposits are formed; if a rapid fatty change, with abundance of moisture, pus and abscesses are produced; in either case ulceration is the final result.

This is the so-called scrofulous diathesis—*scrofulosis.*

In another of this group of diatheses, the tendency to cellular hyperplasia affects the mucous membranes of the air-passages, and the patient, on the slightest provocation, suffers from catarrh, until finally a multiplication of cells occurs so rapidly as to fill up a greater or less number of the air-vesicles of the lungs, generally

those of the apex, and "*consumption*" results; or else an attack of pneumonia being produced by some exposure, the exudation is cellular rather than fibrinous, and catarrhal pneumonia, ending in the majority of cases in a more or less rapid phthisis, occurs.

It is asserted that the general experience proves that the oil is more valuable in affections of the *internal* than in those of the *external* lymphatic glands.

There is one point upon which all allopathic observers agree, namely, "that in proportion as the local scrofulous disease affects a person who has been subjected to bad hygienic influences, and especially to the use of coarse and innutritious food, does the action of the oil appear to be prompt and decided. When, on the other hand, it has become developed in spite of favorable external conditions of living, and when the digestion is very feeble and imperfect, the oil is seldom tolerated, and rarely produces good effects."

But the latter class of cases are just the ones in which the small (similimum) doses are suitable, and will bring about curative results without causing indigestion or gastric irritation.

Baehr, in his Practice, admits its value in *scrofulosis*. He says:

Cod-liver oil is decidedly useful if the digestion is impaired; if the stomach seems disinclined to retain food, and if frequent diarrhœic discharges set in; if, moreover, nutrition is impaired, the body is emaciated and destitute of animal juices. If the appetite is good, the digestion regular, and there is a marked disposition to adiposis, the oil is decidedly hurtful.

H. C. Wood makes the following excellent remarks, viz.:

The value of Cod-liver oil in what is very often called the "*pretubercular* stage of phthisis," has already been alluded to, but is so important that it will bear reiteration. There can be no doubt that consumption often commences with catarrh, and is often developed slowly, as the result of frequently "catching cold." Whenever a patient is feeble, pale, somewhat anæmic, complains of his liability to catch cold on the slightest exposure, even though no local disease exists anywhere, or rather because no local disease exists anywhere, there is cause for alarm, and it is of the most vital importance that the patient be put upon a tonic treatment whose basis is Cod-liver oil, be fed upon a nutritious diet, and have the hygiene of his daily life regulated, especial care being taken to avoid any exposure to cold. In the advanced stage of chronic *phthisis*, the remedy is less efficacious, in that it much more rarely effects a cure than in the pretubercular stage; yet it does more good than all the other remedies of the Pharma-

copœia combined—alleviating the cough, increasing the strength, weight, and general health of the sufferer, often retarding or even arresting the pulmonic disorganization, almost always greatly prolonging life, and sometimes, in conjunction with other measures, effecting a cure.

If you will consult the provings of the oil, as given by Neidhard, you will find that it causes the same "tendency to catch cold upon the slightest exposure," so strongly dwelt upon by Wood. Neidhard's clinical experience proves the correctness of this indication, and he gives many illustrative cases of its power, in attenuated doses, of preventing this tendency.

Among the diseases for which Cod-liver oil is specially indicated is *chronic catarrh*, whether occurring in the *nasal*, *laryngeal*, or *bronchial* passages, or the *intestines*.

When you have thoroughly tried Hepar sulphur, Hydrastis, Copaiva, and other remedies, and the patient is not rid of the discharges, and is, moreover, anæmic, thin, and *catches cold easily* upon the *slightest exposure*, and thinks he "would get well if he did not catch a new cold every few days," in such cases you will find the oil a *specific*. It will restore the general tonicity of the patient, and prevent the susceptibility to catching cold, and a cure will result. An extensive experience in the treatment of catarrhal affections incident to a residence near the Great Lakes, proves to me that Cod-liver oil is the best *radical* remedy we possess for that disease.

Chronic Rheumatism.—It was in this disease that the oil first gained its reputation. It will not cure, however, unless the general indications for its use are present.

It remained for Dr. Muller to point out distinctly the two kinds of chronic rheumatism.

(1.) *Musculo-fibrous rheumatism*, arising in a state of abject poverty, and produced by crowded dwellings, insufficient air and light, an originally feeble and impaired constitution, a scrofulous constitution, and inherited proclivity to this disease.

This form of rheumatism begins with *dull pains in the limbs, extending gradually to the spine, and as high as the neck, producing stiffness and more or less permanent rigidity of the muscles of the trunk and limbs.* It presents no inflammatory phenomena, but is accompanied with œdematous swelling *without* redness, and may terminate in paralysis.

(2.) *Fibrous rheumatism*, produced by protracted residence in damp and cold

localities, and differing from the first variety in being confined to the joints. It, however, gradually exhausts the strength and impairs the nutrition of the patient.

In these two forms only of rheumatism did Dr. Muller find the oil of any service. In other words, Cod-liver oil is not a remedy for rheumatism *as such*, but for a cachectic state of the body which sometimes sustains and protracts indefinitely the rheumatic disorder.

Stillé says that in such cases the oil at first *aggravates the pains*. He explains it thus:

It is only at a later period, when the oil has begun to improve nutrition, that it triumphs over the state of morbid sensibility by enabling the system to get rid of its cause.

I would explain it differently. All homœopathic remedies, if given in too large doses, at first aggravate. So with Cod-liver oil, which, if given in smaller doses, will cure more promptly and without the aggravation.

I have alluded to its use in *scrofula*. It has been observed that in scrofulous enlargements of the parotid, thyroid, and submaxillary glands, and of those seated in the neck, axillæ, and groin, Cod-liver oil was of little use. But when, with such swellings, *caries of the bones* exists at the same time, the caries is rapidly cured, while the glands remain unaffected. It is in *caries* and *strumous osteitis* that Cod-liver oil has made its most brilliant cures. Swelling, softening, and disintegration, with ulceration of contiguous soft parts, external abscesses, hectic fever, and marasmus, have all disappeared after the use of the oil. The more chronic and torpid the disease, the more efficacious does the oil appear to be, and it always improved the general health before the general affection.

It is most useful when the caries attacks the *epiphyses of the long bones*, and less so in caries of the shafts of these and of the flat bones.

It is of doubtful value in necrosis and vertebral caries. In *hip-joint disease* it has cured a large proportion; but it is said to be more valuable when the disease originated in the *bone itself* than in the synovial membrane.

It is more successful in the cure of *fistulæ and abscesses around the joints* than in affections of the joints themselves. *Chronic ar-*

thritis of the *ankle-joint* is oftener benefited than is arthritis of the hip-joints.

In *rachitis* its curative power is often wonderful. Trousseau found it useful in children with imperfect ossification of the bones, enlargement of the cranium with persistence of the fontanels, tardy or premature dentition, enlargement of the liver, and abdominal dropsy. Sometimes, after four or five days of treatment, the pains in the limbs ceased, and at the end of a fortnight bones which before were flexible acquired a good degree of firmness.

In *softening of the bones* in adults the oil produces equally surprising cures.

Not only in ulcers and softening of the bones is it useful, but in *ulcerations of the glands.* Although the oil may fail to benefit swollen glands, so soon as those glands are attacked by *scrofulous abscesses and ulceration*, or when an *indolent ulcer with excoriated edges remains*, or one extending under the skin and beneath the muscles, nothing promotes a cure so certainly as Cod-liver oil. This curative power is signally manifested in *cold abscesses;* the serous is replaced by a purulent discharge, healthy granulations cover the indolent surface of the sore, and cicatrization ensues.

Tabes mesenterica is often relieved and sometimes cured by this remedy. The children are *pale, cachectic, greatly emaciated*, with *large, tumid abdomen, enlarged liver*, and *swollen mesenteric glands.*

I have cured several such cases, when inanition seemed inevitable, by the administration of Cod-liver oil (with and without Phosphate of lime), in doses not exceeding *fifteen* drops three times a day, assisted by the inunction of a few teaspoonfuls into the abdominal cutaneous surface.

If, however, the glands are *greatly* enlarged and evidently tuberculous, it is doubted if the oil will cure.

Diseases of the skin are often benefited by this medicine if they are engrafted on a scrofulous or cachectic state of the system. If an inflammatory element prevails, it is worse than useless, unless used in the high potencies.

Lupus is more apt to be cured by the oil than any other. Emery treated seventy-four persons affected with this disease; of these, twenty-eight were cured, and all greatly benefited. Other authorities give as favorable reports. The doses used varied im-

mensely. Some prescribed a pound or two a day for months! Others a teaspoonful three times a day. The small doses cured as readily as the large, showing that it was the medicinal action of the constituents of the oil, rather than the *nutrient*, which effected the cures.

The only other cutaneous disease which is as promptly cured by the oil is *ichthyosis*.

Two English physicians report cases cured in a short time by the oil, used internally and externally. I have cured two cases in children by giving small doses internally, and its inunction into the diseased surface.

It is in *phthisis* or *pulmonary consumption* that the Cod-liver oil has been most extensively used—and *abused*. The amount that has been poured down the throats of the unhappy victims of this disease is simply incredible!

Like all new remedies for consumption, its powers and virtues were once lauded to the skies.

An immense experience, both in public and private practice, during the last thirty years, has greatly modified the early and extravagant estimate of its value. It is estimated that when judiciously given (in allopathic practice) about *eighteen per cent.* are cured; sixty per cent. benefited; while the balance are injured, or indifferent to its action. It is known, however, that the death-rate from consumption has certainly diminished since its use.

In homœopathic practice it has not been used sufficiently to enable me to give you any statistics of its value when prescribed according to our law. Owing to prejudice, lack of confidence, or what is more probable, ignorance of the special indications for its use, our school have rarely prescribed it in phthisis. The time has come when we should ascertain definitely its sphere of action, and the characteristic symptoms and conditions calling for it.

We can attain this knowledge by (1) a careful study of the experience of trustworthy and honest allopathic practitioners; (2) a study of the symptoms of its constituent elements in health and disease; and (3) a record of its effects when prescribed in small doses.

The homœopath who *will* not prescribe Cod-liver oil in tuberculosis *because* it is abused in allopathic practice, is unworthy the

name of physician. If it cures, it does so *because its constituents are homœopathic to the disease*, aided by its powerful nutrient qualities.

Some of our authorities are liberal enough to advise its use in appropriate cases. Baehr, after giving the special indications for Iodine, Phosphorus, etc., says:

As regards *Cod-liver oil*, even the physiological school admits that it acts well in *phthisis*. The Iodine it contains being present in only a small quantity the boldest conclusions were resorted to for the purpose of substantiating the theory that the *oil* alone was the curative agent. That this theory is erroneous, can easily be shown by some other oil being substituted for Cod-liver oil—the same effect will not be obtained. The small quantity of Iodine is sufficient for the homœopath to account for the action of the oil. That it should be used with caution has already been stated at the conclusion of our chapter on scrofulosis. The same maxims that were laid down on that occasion are likewise applicable to phthisis, so much more as it is decidedly injurious to phthisicky patients to have their appetite and digestion interfered with. The dose should likewise be carefully measured; a teaspoonful in the morning is sufficient. It is decidedly improper to prescribe a spoonful morning and evening. A morning dose is sufficient. In the evening the oil disagrees with most persons. No other medicine should be given with the oil.

I do not agree with Baehr in relation to dose, nor his prohibition of other medicines. I think three small doses a day are better than one large one.

Dr. Mayhofer, of Nice (see "Diseases of the Respiratory Organs," vol. i), says:

Cod-liver oil justly merits the high reputation which it has acquired in correcting those deficiencies of nutrition commonly comprehended in the terms scrofulosis and tuberculosis. But, on the other hand, there is perhaps no remedy which has been so much misused, and thereby effected so much harm, as this animal oil. Ask any adult, afflicted with a scrofulous disease, how many medical practitioners have been consulted for him in his childhood, and the answer will be that if their number was great their unanimity was still more marvellous, as they one and all recommended Cod-liver oil as a *ne plus ultra* for his complaint. The quantity of oil that many of these unfortunate children are made to swallow is often truly amazing, yet a great number of them are not only none the better for it, but, on the contrary, all are worse. Some reflection on the two principal types (irritable and torpid) of the scrofulous diathesis, and the all-important physiological part which fat plays in the animal economy, would have prevented these sad results.

In patients exhibiting a strumous diathesis, of a slender and lean figure, and thin, transparent skin, we generally find combined a frequent pulse, great excitability of the nervous system, with high specific gravity of the urine—all signs of an accelerated metamorphosis. It is in this condition that the action of Cod-liver

oil has obtained its antiscrofulous fame. In a short time after its use the angular forms acquire more roundness, and the general susceptibility, as well as the morbid phenomena, gives way to its influence. Scrofulous individuals, however, who exhibit a fatty, puffy, leucophlegmatic body, swollen nose and upper lip, slowness of the cardiac contractions, defective irritability of the nervous system, and low specific gravity of the urine, far from being benefited by Cod-liver oil, are the very victims who have been made to swallow it by quarts, and to no purpose. The reason of this is obvious: fat requires nearly double the amount of oxygen for its combustion (100: 292.14) to that demanded by albumen (100: 153.31), and as it evinces a greater tendency to the generation of acid than the latter, acts, when introduced into the organism, the part of a moderator to the metamorphosis of nitrogenous substances. On the other hand, that part of the oleaginous matter which has not furnished its share toward the production of animal heat by combustion, does so by its accumulation under the cutaneous surface, or enters as a necessary element into the formation of cells. It is thus evident that Cod-liver oil can only be of service when the destructive nutritive process prevails over the constructive one, and that otherwise its agency must rather increase than diminish a lymphatic tendency of constitution.

But the virtues of this animal product are, by a great number of physicians, attributed in a measure to the Iodine contained in it. There can be no doubt as to the salutary influence exercised by this metalloid over some special scrofulous affections; but this does not destroy the fact that Cod-liver oil, like any other fatty substances (the fat of dogs is a popular remedy in Germany for scrofula and phthisis), produces its best effects on lean persons, who, as physiology teaches, consume more oxygen and excrete more CO_2 and bile than fat ones; while on those who show a disposition to the formation of adipose tissue, it effects a contrary result to that which is desired, in spite of the Iodine which it contains. Cod-liver oil is a specific only in a limited number of morbid conditions. In the majority of instances it derives its importance from its value as a nutritive agent arresting a preternatural waste.

We now turn to the best testimony, relating to its use in *phthisis*, afforded by the allopathic school.

The great and enlightened experience of Dr. Walshe led him to conclusions which we will now proceed to quote. You will observe that while he concedes to the oil all of the nutrient qualities which have been claimed for it, he is not prepared to regard it in any sense a cure for tubercular consumption. He asserts:

(1.) That Cod-liver oil more rapidly and more effectually induces improvement in the general and local symptoms than any other known substance. (2.) That its power of curing the disease is undetermined. (3.) That the mean amount of permanency of the good effects of the oil is undetermined. (4.) That it relatively produces more marked effects in the third than in the previous stages. (5.) That it increases weight in favorable cases with singular speed, and out of all proportion to the actual quantity taken; that hence it must in some

unknown way save waste and render food more readily assimilable. (6.) That it sometimes fails to increase weight. (7.) That in the great majority of cases, where it fails to increase weight, it does little good in other ways. (8.) That it does not relieve dyspnœa out of proportion with other symptoms. (9.) That the effects traceable to the oil in the most favorable cases are: increase of weight, suspension of colliquative sweats, improved appetite, diminished cough and expectoration, cessation of sickness with cough, and gradual disappearance of physical signs. (10.) That in some cases it cannot be taken, either because it disagrees with the stomach, impairing the appetite (without itself absolutely nourishing) and causing nausea, or because it produces diarrhœa. (11.) That in the former case it may be made palatable by associating it with a mineral acid; and in the latter prevented from affecting the bowels by combination with astringents. (12.) That intrathoracic inflammation and hæmoptysis are contraindications to its use, but only temporarily so. (13.) Diarrhœa, if depending on chronic peritonitis or secretive change, or small ulcerations in the ileum, is no contraindication to the use of the oil. Even profuse diarrhœa, caused by extensive ulceration of the large bowel, is not made worse by it. (14.) That the beneficial operation of the oil diminishes, *cæteris paribus*, directly as the age of those using it increases. (15.) That the effects of the oil are more strikingly beneficial when a small extent of lung is implicated in an advanced stage, than where a relatively large area is diseased in an incipient stage. (16.) That where chronic pleurisy or chronic pneumonia exists on a large scale, the oil often fails to relieve the pectoral symptoms. (17.) That it often disagrees when the liver is enlarged and probably fatty. (18.) That weight may be increased by it, the cough and expectoration diminished, nightsweating cease, the strength which has been failing remain stationary under the use of the oil, and yet the local disease be all the while advancing.

"Singular proof," says Dr. Walshe, "of the nutritive power of the agent," and, we may add, of its inefficiency as a medicine.

This admirable exhaustive summary of the knowledge which is possessed of the subject to which it relates, confirmed, as it has been, by the conclusions of competent observers, shows a wide difference between the anticipations which were indulged respecting the virtues of Cod-liver oil and the sober realities of experience. But enough remains to prove that among all the remedies that have been proposed for pulmonary consumption, none can be compared with this in efficacy. More than any other it mitigates the symptoms of the disease, and delays its march; while in some cases it appears permanently to arrest the degeneration of tubercles already deposited, and so to improve the nutrition as to prevent the formation of new ones.—STILLE.

Dr. Anstie has called attention to the usefulness of this medicine in the treatment of *chronic convulsive diseases*, namely, *paralysis agitans, simple epilepsy, mercurial tremor*, and *chorea*. Doubt-

less, if the general condition of the patients was such as called for the oil, they would be benefited by it.

The second formula I shall give at the close of this lecture is very highly praised by many physicians noted for their successful treatment of nervous diseases. It is useful in *insanity, dementia, hydrocephaloid states, cerebral exhaustion, spinal exhaustion, neuralgia,* etc., if the general conditions of low vitality indicate it.

Dr. Holcombe once reported an interesting case of *chronic diarrhœa,* caused, as he supposed, by ulceration of the mucous membrane, which he cured with Cod-liver oil in teaspoonful doses. He thought the *local* soothing effect of the oil partly contributed to the cure. But its specific action was probably as important. I have stated that diarrhœa, unless inflammatory, was no contra-indication for its use. I have cured with the oil several cases of chronic diarrhœa in adults, with great emaciation, poor digestion, and depressed nutrition, after Arsenicum, Nitric acid, and Phosphorus had been used unavailingly.

The Dose.—The usual quantity of the oil prescribed by the allopathic school is rarely less than a tablespoonful three times a day. This amount is sometimes doubled and trebled. The result of these massive doses is the same as follows the administration of large doses of any drug. Pathogenetic effects are caused, and the disease instead of being benefited is often aggravated to a serious degree. It seems to be a rule with that school that the dose must be as large as *possible,* without doing serious injury. It is this disregard of the disease-producing effect of the oil, that has driven it into disuse in some quarters, and led to its abuse everywhere.

I have previously stated that it increases the proportion of red globules in *anæmia.* This increase, under the use of large doses, may become abnormal. Stillé admits that "the continued use of the oil may sometimes predispose to parenchymous congestions," and quotes Benson, who found "a consolidated and congested condition of the lung frequent in consumptives treated with the oil." He also quotes Gluge and Theirnesse, who "produced pneumonia artificially in certain animals by feeding them exclusively on Cod-liver oil. The lesions found were hepatizations of

the lung, accumulation of fatty fluid in the parenchyma of the lungs, liver, kidneys, and in the blood." It is not strange then that such acute observers as Stillé and Wood should caution against its use in "some cases of phthisis."

Does it not seem strange that they did not think of *decreasing the dose* in all cases, instead of advising to "use it (in large doses) with caution?"

There is abundant proof, and you will meet with such proof frequently in your practice, that abuse of Cod-liver oil will cause *hæmoptysis, inflammation, fever*, and many unpleasant symptoms, which tend to hasten the death of patients, instead of curing them or prolonging life.

If the Cod-liver oil is homœopathically indicated, *a drachm three times a day should be the maximum dose for an adult.* In a certain class of cases, when its constituents are closely indicated, the dose should be very small; a few drops of the pure oil, or the lower triturations or dilutions. Dr. Neidhard uses a tincture made by adding ℥ix Alcohol to ℥j of the oil. This he prescribes in drop doses, when it is "closely affiliated."

I prefer the triturations of the *brown* oil, because it is the richest in medicinal constituents, and I have seen excellent effects in infants suffering from marasmus, from the 2ˣ and 3ˣ. I rarely prescribe over fifteen drops to young persons, and this dose should not be repeated oftener than three times a day. In these doses, especially if given in the form of emulsion or in capsules, it rarely disagrees with the stomach, and the disagreeable symptoms of gastric irritation it often causes in large doses are avoided.

It is not always necessary that the oil should be administered internally.

You may find some patients with stomachs so sensitive that a few drops will nauseate and cause gastric disturbance.

In such try the triturations or dilutions, but if you see no good effects, and you feel sure that this is *the* remedy, do not hesitate to try the *inunction process.*

It was proven by Polloch and Klenke that animals who are rubbed with the Cod-liver oil daily (on the shorn skin) increase in weight as fast as when administered internally. In some of the hospitals of England and this country this process has been

adopted with good results. In the case of children, especially, this plan is productive of excellent cures.

For many years I have treated those cases of marasmus which occur in children under five years of age, with the 2ˣ and 3ˣ trituration internally, and inunctions of the oil on the abdomen and stomach. In very young infants I rely upon the inunction alone.

I can recall to memory several infants who had been given over to die by eminent physicians of both schools, but who recovered in a few months under the patient and regular daily inunction of half an ounce.

Adults become tired and disgusted with the odor, and it is difficult to get them to persevere; but children rarely seem to be discommoded by it. It is well known that young children rarely object to the taste of the oil; they even become fond of it.

Many methods have been devised to disguise the taste and smell of the oil. The enormous doses prescribed by other schools have seemed to make this necessary, although, as has been stated, children do not generally object to it.

Given in the small doses which are used in our practice, the necessity of such disguise is not so important. We shall, however, be obliged in many cases to recommend various devices for that purpose.

A few drops, or the first trituration, is as offensive to some as a teaspoonful.

The best method of taking the pure oil is to drop it into a little *table beer or porter.*

If the juice of a lemon is sucked just before and after the dose, a teaspoonful or less can be readily taken by most patients. It is said that chewing a piece of smoked herring is the best expedient.

I strongly protest against the use of whiskey or brandy for such purpose. When it is taken in equal or double the amount of the oil, as a disguise, or a stimulant, it soon creates a taste for the liquor, which will grow into a necessity, and you make a drunkard of your patient before either he or you are aware.

Many *emulsions* have been made with the oil. They all contain *lime water*, Phosphate or Hypophosphite of lime, and are flavored with Oil of bitter almonds. *Wilbour's* oil is the most popular, although many other manufacturers imitate it.

One of the most palatable, and I will say the most useful, of all these emulsions is made after the following formula:

℞. Hypophosphite of lime, ... ʒj
Aqua calcis,
Oleum aselli morrhuæ, ää . . . . . ℥viij
Syrup. balsam Peru,
Mucilage acacia, ää . . . . . ℥j
Oleum amygdala amara, ... gtts. v.—M.

Of this the dose is a teaspoonful or less—rarely a dessertspoonful, even to adults. It rarely disagrees with the most sensitive stomachs. The objection to its compound character may frighten a good many purists, but it is hardly more complex than the oil itself, and when the life and health of our patients are at stake, we should not be too stringent in our ideas of "the single remedy and the minimum dose."

Another formula, which has been called the *Phosphoric acid emulsion*, is very popular with physicians who specially treat insanity, nervous diseases, and cerebral exhaustion:

℞. Cod-liver oil, ... ℥iv
Glyconin, ... ℥ix
Jamaica rum, ... ℥ij
Dilute Phos. acid, ... ʒij
Oil bitter almonds, ... gtts. x.—M.

Glyconin is made by thoroughly triturating Glycerin and yolk of egg, equal parts. Add to this Glyconin the Oil of almonds, drop by drop, slowly, stirring it vigorously. Add the Cod-liver oil to the Glyconin. Then add the Rum and Phos. acid. Dose, 15 to 60 drops.

It is generally recommended that the oil be taken after meals, or midway between; but my experience and observation go to show that *small* doses, at least, are better borne if taken just *before* sitting down to meals.

In treating patients constitutionally with the oil, we can adopt the same rules in regard to intercurrent remedies as when we are giving an antipsoric, *i. e.*, if any remedy seems indicated by symptoms which spring up and require attention, the indicated remedy may be prescribed without suspending the oil.

The presence of fever, a bilious-coated tongue, or decided gastric derangement calls for the suspension of the oil until these conditions disappear. Rarely does diarrhœa, unless it is inflammatory, contraindicate the use of the oil. On the contrary, some of the worst forms of diarrhœa have been cured by it.

OPUNTIA VULGARIS.

This member of the Cactus family is the only species which grows as far north as the Great Lakes. I have seen it blooming luxuriantly on the shores of Lake Michigan. We have only a fragmentary proving, in which it seemed to affect the intestinal mucous membrane, and perhaps the abdominal nerves. It has cured attacks of *diarrhœa* with extreme nausea.

Its relationship to the Cactus grandiflora suggests the possibility that a thorough proving might evolve some cardiac symptoms. I would suggest a careful proving of the tincture of the whole plant.

OXALATE OF CERIUM.

This medicine was introduced to the profession by Professor J. Y. Simpson, of Edinburgh (see "Simpson's Memoirs"). He recommended it in very obstinate cases of *vomiting during pregnancy*, and also in some particularly intractable cases of chronic vomiting, which he imagined to be caused by some eruption on the mucous membrane of the stomach. The allopathic school have used it quite extensively in such cases, and their testimony is, that while it gives prompt relief in some cases, in others quite similar it seems to have no effect whatever.

No proving has been made by the homœopathic school, but it has been resorted to by many in obstinate cases. In the Homœopathic Medical Society of Pennsylvania, 1872, during a discussion on "morning sickness," Dr. Charlton stated that for several years he had used the Oxalate of cerium in all cases of morning sickness of pregnancy with unvarying success. Dr. B. W. James had experience in its use. He said: "It very seldom fails in relieving the vomiting of pregnancy, when given in good-sized doses of the 2^{x} trit." Dr. McClelland had tried it and got

no good effects. Dr. Moore relieved some cases with it. Dr. J. E. James used it in three cases without results. Dr. McClatchey had the same results from its use. Scattered through our journals a large amount of testimony for and against this drug is to be found. All agree that if it does no good, it does *not* aggravate the symptoms.

Dr. Peters reports four cases of obstinate vomiting, associated with different forms of disease, all of which had been benefited in a very striking manner by the use of large doses of Oxalate of cerium, after an almost endless variety of measures had been unsuccessfully employed. In one of them, a case of cancer in the stomach, the Oxalate was administered in a dose of four grains every two hours, while the patient was awake, and continued until probably six hundred grains were taken within three weeks, not only without inconvenience but with such marked benefit that food was taken and retained with comparative comfort. —"The Medical Review."

My experience with it is that in the worst cases of vomiting of food, half-digested matters, mixed or not with blood, with great pain during or after vomiting, it sometimes affords material relief. In some cases it arrests the vomiting, but the nausea remains. This would seem to indicate that its action was on the motor nerves of the stomach (or perhaps the œsophagus). In mild cases of morning vomiting, it often affords prompt relief. It is probable that the reason of the uncertainty of its action lies in the fact that we have no proving to disclose its *characteristic* indications. A characteristic indication is often discovered by close observation during the empirical use of a medicine. Some acute observer may observe the keynote of Oxalate of cerium.

Dose.—Allopathic physicians give about five grains of the crude drug before meals. Homœopaths have usually used the lower triturations. I have obtained the best results from the 1st decimal trituration. Believing that, like Bismuth and some other agents, the drug has to come in contact with the coats of the stomach in order to act on that organ, I think it should be given suspended in water or some bland liquid. (Two or three grains of the 1st, before each meal.)

Oxalate of Cerium in Chronic Cough.—My attention was first called to the Oxalate of cerium in chronic cough, something over a year ago, since which time I have used it in a goodly number of instances, until I have come to regard

it as one of the principal remedies in the treatment of this distressing malady. Coughs resulting from chronic bronchitis, phthisis, and chronic laryngitis, have promptly yielded to this remedy in my hands, after both the internal and external administration of other drugs had signally failed. In giving it to adults in only one instance have I ever experienced any ill effects from its use. Upon this occasion I used seven grains at first, which produced narcotic effects. I then reduced the quantity to five grains, which quieted the cough without the deleterious effects first produced. When I first began using Oxalate of cerium I produced decidedly narcotic effects in two instances from the administration of five grains to children of from ten to thirteen years of age. In prescribing this drug I invariably direct it to be taken half an hour before rising in the morning; and I may say that although I have used it *frequently*, I have in only one or two instances been disappointed in the effects produced. I give five grains to adults, and diminish the dose, when treating children, in proper ratio, according to age. —FRANK ALLFORT, M.D., in "New York Medical Record."

ORIGANUM VULGARE.

The Wild Marjoram is not indigenous to this country, but may be found in all the older States, introduced from England, where it is a native. It differs botanically from the Sweet Marjoram cultivated in gardens.

The provings from which the pathogenesis in Vol. I is composed were made by Dr. Gallasardin, of Lyons.

According to his proving, verified by the cures he made with it, it appears that its principal *sphere of action* is upon the *generative organs*, stimulating the seat of erotic impulses, and thence affecting the brain and nervous system, just as sexual overexcitation does from any cause. It resembles Cannabis indica, Platinum, and Valerian, and possibly Collinsonia, Helonias, and Hedeoma in its primary action. It causes and has cured *lascivious ideas and dreams, hysteria from excessive irritation of the genitals.*

Dr. Gallasardin cured with the 3^{x} several cases of *onanism, masturbation, leucorrhœa with sexual irritation.* Dr. Emory cured similar cases with the 30th. Dioscorides says it cures sterility, leucorrhœa, and "flatulency of the uterus." Culpepper recommends the cultivated Marjoram for the same complaints. No English author mentions its power of exciting erotic desires.

PAULLINIA SORBILIS (GUARANA).

This is comparatively a new medicinal remedy in this country, a small quantity only having been brought from France, and known to but very few practitioners. For several years its valuable properties have been known and appropriated in the principal cities of Brazil, South America, and on the continent of Europe, where it is used in a variety of acute and chronic diseases, as a general popular remedy, and by physicians in regular practice as well.

Dr. Gavrelle, physician to Dom Pedro, employed it very often while in Brazil, and afterwards in France, and considered it a valuable remedy. He found it advantageous in the diarrhœa of *phthisis, sick headache, paralysis,* tedious convalescence, and generally as a tonic.

Dr. Ritchie, surgeon in the English navy, says:

> It is held to be stomachic and antifebrile, and is used in dysentery, diarrhœa, retention of urine, etc. It stimulates, and at the same time soothes the gastric system of nerves. It is indicated in fever, reduced vital powers, in grief, depression of spirits, colic, flatulence, *anorexia,* nervous hemicrania.

Severe cases of neuralgia, and diarrhœa with pain, have been most gratefully relieved. Affecting directly the *mucous membrane,* its application is very general and presents large expectations.

Dr. Macdonald, of Edinburgh, Scotland, has an extended and carefully written communication in "The Practitioner," published in London, and reprinted in New York, September, 1873, establishing the reputation of *Guarana* for sick headache. Its effects in neuralgia, sick headache, and diarrhœa are sometimes almost *immediate* and wonderful.

The term Guarana is derived from the name of a tribe of Indians, who are dispersed between the rivers Parana and Uruguay, by whom it is very commonly used as a condiment or medicine, and also brought into the cities on the coast as an article of commerce.

It is prepared from the seeds of a climbing plant, "Paullinia sorbilis" (according to Martius), by the natives. The seeds are

dried, pounded, mixed with tapioca, and with water made into rude cylindrical masses, which, by drying, become very hard.

Johnson, in his "Chemistry of Common Life," says the seeds are used as we use cocoa, as a beverage. They contain an alkaloid, said to be identical with "theine," found in tea and coffee.

In the "Materia Medica" of Trousseau and Pideaux is an account of its use in *migraine*. It has lately been called up by Dr. Wilks, of Guy's Hospital, London. It has been successfully used by Dr. Ward, of Montreal, and Dr. Helmshew, of British Columbia.

It has become a popular remedy with the allopathic school, not only in *sick headache*, but in *colic*, *diarrhœa*, and even in *chronic rheumatism* and *neuralgia*.

Its *sphere of action* appears to be upon the *sympathetic nervous system*, upon which its primary action is that of a sedative. In this respect it resembles Valerian, Scutellaria, Pulsatilla, Coffea, and perhaps the Bromides. It may be found to resemble Iris and Dioscorea.

I have cured a few cases of *sick headache* with the powder. It appears to be best suited to those persons who have used tea and coffee to excess, or in whom *nervous headaches*, followed by vomiting, are excited by any error in diet or depression of mind.

It has been recommended in that unpleasant and uncontrollable *sleepiness*, *drowsiness*, and *heaviness of the head*, with *flushed face*, which occurs in persons of sedentary habits *after eating*. If it will remove this symptom it will be a boon to many students and literary men.

Dr. George A. Hall, of Chicago, tested its value in the summer of 1874 in the "*summer complaints*" of children; in *diarrhœa from teething*; in *vomiting and diarrhœa from want of proper food*; and he reports that in many cases its use was followed by surprisingly good results. In one case of *chronic diarrhœa*, nearly to marasmus, it cured the child in a short time. He gave teaspoonful doses of a solution of ten drops of the tincture or fluid extract in half a glass of water, repeating the dose every few hours.

Dr. Scudder, in the "Eclectic Medical Journal," gives the following candid account of his experience. He says:

I will report two cases showing its non-curative action. Mr. B. had suffered

for years from attacks of most intense headache, of which sickness at the stomach was a common feature. A physician suggested tincture of Guarana, in half teaspoonful doses, every two hours. He procured it and took the dose as ordered. The pain became almost unbearable, and nearly the entire night he suffered from delirium. The experience was so unpleasant that he decided to take no more *new* remedies.

Mr. A. O. T. has suffered for the past nine years with asthma of the severest form, and has tried almost every remedy suggested for this most obstinate complaint. Having exhausted my remedies, I concluded to try Guarana, as possibly a nerve stimulant would be of advantage.

Of the tincture prepared by H. M. Merrell & Co., I ordered fifteen drops every four hours. Taking the first dose, he went out to the stable, and in probably not more than five minutes the difficulty of breathing became so great that he was forced to grasp the manger and struggle for breath. It passed off in the course of half an hour, but it was the severest paroxysm he had ever experienced. Not thinking that the medicine had anything to do with it, he repeated the dose, which was followed by another bronchial spasm. This was witnessed by the family, and described as most fearful, and from which recovery seemed almost impossible. The face was flushed with blood at first, then became purple and livid, the eyes bright and staring, and the struggle for breath almost agonizing. I need hardly add that the medicine was not repeated.

The Guarana acts upon the nerve-centres, probably upon the brain, spinal cord, and especially upon the sympathetic and its associate cranial nerve—the pneumogastric. Its action is very decidedly stimulant. I have used it in cases of headache, with enfeebled circulation—want of stimulus, with most marked benefit; and in some other affections characterized by enfeebled innervation, and it is in such cases that I would suggest its trial. The two cases reported were just the opposite, and required sedation instead of stimulation. In the case of Mr. T., the evidence of an irritable and excited nervous system were marked, and giving Guarana simply added fuel to the flames. The case of headache was of the same character—it would probably have been relieved by Gelseminum. I am satisfied, further, that the dose advised is too great, at least of the tincture I have used. Try it in doses of five drops, and repeat, if necessary. It is always well to commence a new medicine with the minimum dose.

In relation to its use in *chronic rheumatism*, Mr. E. A. Rawson states ("Irish Hospital Gazette," April 15th, 1874) that when suffering severely from *lumbago*, and other remedies failing, he tried Guarana as an experiment. He took fifteen grains in hot water with cream and sugar, and experienced entire relief from pain for twenty-four hours. When the lumbago returned, he took another dose, with the same result. He says:

I gradually increased the dose to forty grains, and took it regularly once a day for about a week. The lumbago disappeared. I gave up the Guarana, and in a few days the pain in the back returned. A forty-grain dose removed it, and

it did not return for several days afterwards. Now, whenever it does, I have my remedy at hand. During the last month I have experimented largely with Guarana, on a variety of patients, rich and poor. The results vary. When the pain is acute, coming on with sharp stings, Guarana acts like magic; when it is of a dull, aching character, the drug is slow in its action, and several doses must be taken before any decided benefit can be perceived.

I have come to the following conclusions, viz., that whenever the fibrous envelopes of nerves, the aponeurotic sheath of muscles, the fasciæ of tendons, are the parts affected, Guarana gives, if not instantaneous, at least very immediate relief, which will last from twelve to twenty-four hours; and I confidently expect that perseverance in the use of the drug, gradually increasing the dose up to forty grains, will entirely remove any of the above-mentioned kinds of rheumatism.

Of the good effects of Guarana on nervous hemicrania there is no doubt; and I trust it will prove in other hands as valuable against rheumatism as it has in mine.

You will, all of you, have obstinate cases of nervous disorder where the ordinary remedies fail. In such cases try the Guarana, and report the results.

PASSIFLORA INCARNATA.

I wish to call your attention to this plant, and quote a paper by Dr. L. Phares, A.M., M.D., of Newtonia, Miss.:

In 1838, while a student, my old friend, the late Dr. W. B. Lindsay, then of Bayou Gros Tête, La., directed my attention to this plant as an unrivalled remedy for tetanus infantum. He used it for thirty years with extraordinary success in all cases of tetanus neonatorum. While resident at Grand Gulf, Miss., he extended its uses, and after his removal to New Orleans he still further enlarged his ideas as to its uses, several times requesting me to prepare and furnish him the medicine. Having no acquaintance with scientific botany, and finding the plant differed much in strength in different samples, he naturally fell into the error of supposing that the difference resulted from using five or six species. He was finally convinced, however, that he had never used but one species, and that the difference in strength was caused by difference in locality of growth, season of gathering, mode of preparing, etc. As found on the dikes or levees around New Orleans, "it grows luxuriantly, but has no virtues at all." That grown on uplands is much better, and that gathered on "Bayou Gros Tête seems to be stronger." Last year, a few weeks before his death, he wrote in answer to an inquiry which I had made: "I have much to say—I am satisfied it is no narcotic. It never stupefies or overpowers the senses. A patient under its full influence may be wakened up, and he will talk to you as rationally as ever he did; leave him a moment, and he will soon be off to the Elysian Fields again. I have tried it, my friend, in all sorts of neuralgic affections, and have usually astonished my more enlightened patients with it. Many times I have had them to ask me, what in the world it was that had such a sweet influence over them." From ob-

serving its very delightful effects, he always called the inspissated juice by the neither very classical nor scientific appellation, *somnum seraphium*.

Last year was very unfavorable for making a good preparation, so that I sent him but a very small quantity, which, he wrote, was too precious to use for anything but tetanus, for which he considered it a specific. Of the aqueous extract of the root, he writes: "It is a famous application for chancre. I have, by spreading it over erysipelas, driven that inflammation away in a short time. I have cured irritable piles permanently in two or three applications. I have never found its equal in new burns." Besides his experience in private practice with the Passiflora, he had a fine opportunity, during the late war, of using it in a military hospital, where there were many cases of syphilis, all of which he managed so successfully as to cause much surprise. Such is a brief sketch of Dr. Lindsay's experience with this remedy.

I have myself used it in syphilis, but not in a sufficient number of cases to form a decided opinion as to its value. I never saw anything else act so promptly in erysipelas. I have used it with advantage in ulcers, neuralgias, and tetanus. I have seen wonderful effects from it in relieving tetanus; but, having no record of cases by me, I could not with propriety attempt to detail cases. I will merely mention one case from memory. Some ten years ago I was called to see an old lady in a distant part of the country, who was reported to be "having fits." I found her able to be up most of the time, but, while examining her, convulsions came on, affecting mainly the trunkal muscles and drawing the head back. I gave her instantly a dose of Passiflora. The convulsions subsided, and she has never had one since. I continued the use of the medicine in small doses for a few days. I have used it treating tetanus in horses—a disease usually considered as inevitably fatal to that noble animal. It has never failed to cure the horse. Let one case suffice to illustrate. In 1851, early one morning, one of my horses was found to have trismus. A number of remedies failing, and the spasm becoming general, apparently affecting all the muscles—tetanus erectus—I abandoned him. He was down, his legs extended, and every muscle so tense as to be immovable by any force that could be safely applied. After some hours at night I concluded to try him with the Passiflora; gathered a quantity—stems, leaves, and flowers—pounded, moistened with water, expressed ten or twelve ounces, and poured down his throat through a tube introduced at the side of the mouth. He was then apparently dying, and no one believed he could survive half an hour. I saw him no more till next morning, when he was well and grazing at a distance from the place where I had left him the night before. During the late war, my son, Dr. J. H. Phares, had occasion many times to prescribe the Passiflora for tetanus in horses, with one invariable result,—prompt, perfect, permanent cure. He fortunately saw no case in the men.

The leaves are gathered in May, or as soon as the plant blossoms, but before forming fruit. In fact, the whole plant may be used. It must be pounded, and the juice expressed through a strong cloth, into shallow glass or porcelain dishes, to dry as rapidly as possible in the shade, with free circulation of air. When dry, it is reduced to a powder by the use of mortar and pestle, bottled and closely corked. The dose of this powder is from one to four teaspoonfuls, repeated *pro re nata*. I have made ethereal, aqueous, and alcoholic preparations, and per-

haps others; but the inspissated juice reduced to a powder is the best I have ever used. The size of the dose renders it somewhat objectionable. Some eight or ten years ago I requested a manufacturing chemist of New York to prepare the concentrated active principle of the Passiflora incarnata, which he promised to do, but he has never reported progress. If a concentrated solution could be obtained, I have no doubt it would supersede Morphia and Atropia for hypodermic medication, its action being so much more pleasant and safe. I have never seen the least unpleasant effect from it in any dose, however large, although I have given it in quite large doses. When gathered later than May, the juice can never be sufficiently inspissated to be pulverized. It then contains too much sugar and gum. For external use the whole plant may be boiled for an hour, then thrown out, and the extract thus obtained boiled down to a proper consistence for the object in view. For this purpose the perennial roots answer well, gathered after the first frost in autumn.

The *incarnata* may be easily distinguished from the other species of Passiflora. This and the *luteo* are the only two species found in the United States north of Florida. Three other species are found in Florida; but all these, like the P. luteo, are small, and bear fruit less than half an inch in diameter, while the P. incarnata is much larger, and grows in the open fields, bears a fruit about the size and shape of the Muscovy duck, and has serrated trilobate leaves. From the sharp report emitted by the immature fruit when crushed, it is very generally called the May-pop.

Since the foregoing was written I have treated with the fluid hydro-alcoholic extract of Passiflora, obtained from the dried leaves by displacement, several cases of neuralgia, and one of sleepless, incessant motion and suicidal mania. With the same extract, during the current week, Dr. J. H. Phares has treated, with the most prompt and satisfactory success, a very virulent and hopeless case of tetanus, with opisthotonos, trismus, and convulsions, in a child two years old. Other most potent remedies, in heroic doses, having failed to produce any effect in this case, he thinks nothing but the Passiflora could possibly have saved the child.

It has never been used by homœopathists, but deserves to be proven and used in our practice.

PENTHORUM SEDOIDES.

(*Virginia Stone Crop.*)

This is an herbaceous, perennial plant, found growing in wet grounds throughout the United States and Canada.

It is said to have a curative action in catarrh and in diarrhœa. In large doses it causes an unpleasant fulness of the head and much dreaming in sleep, post-nasal catarrh, and much irritation of the fauces. (See proving in Allen's *Encyclopedia of Materia Medica.*)

PEPSIN.

This agent cannot properly be called a *medicine*, for by this term we understand an agent that is capable of causing pathogenetic symptoms in a healthy person. But it can be called a remedy. It is very properly observed by Wood, in his chapter on "Digestants," that "it is evident that any influence for good which it possesses is dependent upon its solvent power, and that this, therefore, is a measure of its value."

When we consider the statement of physiologists, that the best article of Pepsin is capable of dissolving only "four times its weight of fibrin at the temperature of the body," aided by Muriatic acid, and "that fifteen grains will only effect the solution of ninety grains of boiled white of egg in twelve hours," we may well exclaim with Wood, who, in commenting on the fact that "grave doctors prescribe for *men* Pepsin as an artificial solvent in doses of ten grains," says: "Evidently one of two things is certain: either the present practice is ridiculously absurd, or else Pepsin acts upon the stomach itself in some way as a stimulant."

I confess I am at a loss to account for the high estimate which some physicians place upon it. I know many of both schools who habitually prescribe the "Wine of Pepsin" in spoonful doses after each meal, and claim good results from its use. But the best physiological chemists assert that *alcohol destroys its digestive power*. It must be, then, that the apparent benefit is due to the action of the wine alone.

Pepsin has been thrown upon the market in various combinations. The "Elixir of Iron, Bismuth, Strychnia, and Pepsin" has been lauded in extravagant terms. But chemists assert that the combination of Pepsin in *solution* with any of the above drugs destroys its value.

I agree with Wood and other authorities, that it rarely benefits *loss of digestion in adults*. I have thought it aided digestion in delicate women. But the benefit may have arisen from the regulation of the diet and habits of the patient. Generally, other remedies (medicines) are given along with the Pepsin, which still further throws a doubt upon its value.

In a few cases of *slow and imperfect digestion* in adults I have given the Pepsin in powder, alone, for weeks, and the testimony of the patients went to show that their digestion did improve under its use.

The *vomiting of food*, which occurs very soon, or an hour or two after meals, is often arrested by the administration of ten or fifteen grains of good Pepsin just *before* or *during* meals. The ingesta thus expelled is usually *undigested*, or undergoing an acid fermentation.

In the *vomiting of pregnancy* Pepsin often acts with singular efficacy. It does not always *cure*, but it *arrests* the vomiting for days or weeks, and affords a grateful alleviation of a distressing symptom.

In *lientery*, even of adults, and when resulting from serious gastro-intestinal disease, where no *cure* is expected, the Pepsin in twenty or thirty grain doses will often change the undigested character of the evacuations.

It occasionally happens that the saccharated powder of Pepsin does not act when decidedly indicated. In such cases the failure is due to the lack of Muriatic acid in the stomach. If we now prepare a solution of Pepsin in water (gr. v to ʒj), and add dilute Muriatic acid in the proportion of a drop or two to each drachm, and administer it in one or two teaspoonful doses, we shall get satisfactory effects.

I have in many instances given it in combination with Nux vomica, Strychnia, or Bismuth, and believe that when thus administered it resulted in more benefit than when *it* was given alone, or when the *medicines* were given singly.

My plan has been to add to 100 grs. of Shaffer's Pepsin, 10 grs. of Nux vomica 2ˣ, or 10 grs. of the Citrate or Subnitrate of bismuth (crude), or 10 grs. of Strychnia 1ᶜ The mixture was carefully triturated twenty minutes. Of these preparations a 5 or 10 grs. dose is ordered to be taken immediately before or after meals.

The selection of the *medicine* is made according to the *symptoms* of the patient.

In a few cases I have combined Pepsin with Pulsatilla, Ptelea, or Hydrastin, and believe I have seen good results.

The testimony as to the value of Pepsin in diseases of young chil-

dren is very strong. Remember that this agent is in no sense a drug. You cannot injure a child by giving *any* quantity. *If it does not digest the contents of the stomach it does nothing at all.* I believe the use of Pepsin is much more rational in children than adults. It certainly has a better reputation in the *chronic indigestion*, and consequent *diarrhœa* of infants, than the same condition in adults.

I have found it particularly useful when the *casein did not coagulate in a loose, flocculent manner*, but formed large, solid masses in the stomach, causing great distress, vomiting, or painful diarrhœa. It will not always remedy this condition, for the reasons given in that excellent little *brochure* on "Infant Diet," by Dr. Jacobi.

Vomiting or *diarrhœa* of undigested food in infants will often disappear after the administration of a few grains of Pepsin, given before nursing the breast or bottle, or *with* its regular meals.

If it fails to do this when given singly, prepare it with Calcarea 3^x, Pulsatilla 3^x, Nux 3^x, or China 1^x, and you will get better results than when either medicine is given alone.

The action of Pepsin is principally exerted upon fibrin, albumen, and casein, but

PANCREATIN

Is supposed to have the power of converting *starch into sugar*, and to *emulsify fat.* It assists in the digestion of starch and fat, and is recommended in those cases of *dyspepsia* or indigestion where the patient cannot eat those substances. The dose is the same as Pepsin. It is sometimes combined with that agent. It is often prescribed for the purpose of aiding the digestion and assimilation of Cod-liver oil.

PHORADENDRON.

VISCUM ALBUM.*

This new remedy has lately been introduced as a partus accelerator. In my "Therapeutics of New Remedies" I refer to the use

* Since the appearance of Dr. Long's statement, Dr. E. S. Crosier has investigated the botanical relations of the Mistletoe used by Dr. Long, and he announces, in the "Louisville Medical News," that it is not the Viscum album, but

of Viscum album by Dr. Huber, of Germany. He used it successfully in *retained placenta, metrorrhagia,* and *menorrhagia,* and his cases appeared to show that the condition was that of uterine inertia. I have never tested it fully, and therefore cannot give my favorable testimony. But I will quote the testimony of Dr. Long, which seems conclusive:

Dr. William H. Long, of Louisville, says that for ten years he has used the Mistletoe as an oxytoxic, having been led to do so from observing that farmers in the part of the country where he formerly had practiced, were in the habit of giving Mistletoe to such of their domestic animals as failed to "clean themselves," or expel the placenta after the delivery of their young. In 1857 he first used an infusion in the case of labor, in which the second stage was delayed through inefficiency of the uterine action. Contractions followed in twenty minutes. He has since used it in decoction in a large number of cases, and does not recall an instance of its having failed to stimulate the uterus to contract.

He believes in its superiority to Ergot—

1st. Because it acts with more certainty and promptness.

2d. That instead of producing a continuous or tonic contraction, as Ergot does, it stimulates the uterus to contractions that are natural, with regular intervals of rest. Consequently it can be used in any stage of labor, and in primiparæ, where Ergot is not admissible.

3d. It can always be procured fresh, does not deteriorate by keeping, and is easily prepared.

He has used Viscum in many cases of menorrhagia and hæmorrhage from the uterus with gratifying results, and has taken pains in such cases to give Ergot and Mistletoe a competitive trial, with the object of testing their relative merits; he unhesitatingly pronounces in favor of the latter. Indeed, cases in which Ergot given in powder, decoction, and fluid extract failed to give any relief, the Viscum acted promptly.

In post-partum hæmorrhage, the results have been no less satisfactory than in labor and menorrhagia, firm contractions of the uterus being secured in from twenty-five to fifty minutes after administering from one to two doses of the Mistletoe.

According to Dr. Long, the remedy may be administered either as an infusion, tincture, or fluid extract, but he considers the latter to be the most convenient. The former he directs to be made by taking two ounces of the dried, or four ounces of the green leaves; pour on these one pint of boiling water, cover closely, and allow to stand until cool enough to drink. Two or four ounces may be given

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the *Phoradendron flavescens* of Nuttall. Therefore the Viscum album cannot be used for this purpose, although it may possess similar properties (see "New Remedies," 4th edition), and resembles Cimicifuga in many respects.

Dr. A. G. Hobbs contributes to the same journal a report of three cases, two of them obstetrical and one of menorrhagia, and says, "My experience with this parasite is that it acts more promptly and more decidedly as an oxytoxic than Ergot."—(See also a case in "American Journal of Obstetrics," July, 1857.)

at a dose, and repeated in twenty minutes if necessary. The green leaves impart a disagreeable taste that is lost in the process of drying.

He has also used an alcoholic tincture made by taking eight ounces of the dried leaves and saturating them with boiling water, and adding alcohol to make one pint; but he does not think this as efficient as either the decoction or fluid extract. It should stand ten days before ready for use. Viscum makes a fluid extract of a dark-brown color, which possesses all the virtues of the parasite.

The best time for gathering the Mistletoe is in November, after a few frosts have fallen, and before the sap freezes, though it may be gathered and used at any period of the year. When gathered, it should be at once spread out to dry, as it will mould in a very short time if kept in a box or sack. It is best to dry it in the shade.

Viscum abounds in the Western country, and is found in greatest quantities on the walnut and elm trees, though it grows sparingly on a few others, as the red and black locust, oak, etc. So far as Dr. Long is aware, there is no difference in its properties or strength made by the kind of tree on which it grows.

I have used it in a few cases, but owing to the doubtful purity of the preparation I got unsatisfactory results.

PHOSPHIDE OF ZINC.

Since the introduction of this remedy into our Materia Medica, no provings have been made of it, and the clinical experience has been scanty.

I have used it a good deal for the secondary effects of *cerebral congestion*, or *apoplexy*. Hammond asserts that it removes the debility, *mental depression*, and *paralysis* following such attacks.

In a few cases it seemed to have the desired effect, but it utterly failed in others.

Taking the indications for Phosphorus and Zinc as a basis for its selection, I have given it in "brain-fag" of business men, who become haggard, pale, sleepless, and suffer from depression of spirits and causeless worry. In such cases it acts well.

It has cured aggravated cases of *mercurial tremors*. It ought to cure *chorea* with imbecility. I believe it will be found useful in some varieties of *delirium tremens*.

Impotence of a cerebral origin, *i. e.*, when caused by overstudy and nervous debility, or when resulting from previous abuse of the sexual function, ought to be removed by this remedy.

I think the Phosphide of zinc has not met the expectations of allopathic physicians. At first they used it largely, and perhaps indiscriminately, but meeting with no unusual success, they became disappointed and dropped its use.

I find no recent mention of the remedy in our literature except a brief article in the "Medical Investigator," by Dr. J. A. Young, of Hopkinsville, Ky. I quote his paper entire:

The object of this paper is, in the absence of a systematic proving, to give some vague indications drawn from clinical observations, and thus aid in the development of the powers of a remedy destined to play no subordinate part in the treatment of nervous diseases, and that promises to fill a long-felt vacuum in our Materia Medica. Without attempting to theorize in regard to the method of the action, there is ample testimony to justify the assertion that it is a speedy and powerful nerve-tonic or stimulant, numerous clinical reports testifying to its beneficial action in cases arising from lesions of nerve structures. Dr. Hammond, in his work on "Nervous Diseases," claims to have first introduced this remedy to the notice of the American profession, and under the influence of the popular chemical school recommends it in cases where *Phos.* is indicated, and attributes its effects to that element of its composition alone. The testimony of English physicians is, that as a substitute for *Phos.* its action is not satisfactory. The deduction formed from clinical observations is, that while its action resembles that of each of its chemical constituents, yet its chosen analogue is *Nux vom.*, and that it will be specially beneficial in those cases where both *Phos.* and *Nux*, apparently indicated, have been used without satisfactory results. Dr. Hammond recommends it in strong terms, in doses of one-tenth grain (often in combination with *Nux* or *Strychnia*), in cases of cerebral congestion (passive), spinal anæmia, etc., and says: "My experience with this remedy has been extensive. I have never known it to produce the least unpleasant effects." In three cases under my observation the use of the 3d has produced positive and unmistakable excitement of the sexual desire, manifested in two cases by erections of penis, accompanied by unusual voluptuousness and desire for embrace; and in the third case by nocturnal emissions, accompanied by voluptuous dreams and intense nervous thrill. I would be apprehensive of unpleasant effects from any lower potency, especially so in one of the cases, for the aggravations are manifest even from one dose of the 3d. In addition to this sexual excitement, in one case, a larger dose than usual will cause a pleasant nervous excitement, with sleeplessness after 3 A.M. Says that "it wakes me at 3, and I feel as if under the influence of pleasant and quick music." This wakefulness differs from that of *Nux* and other remedies in that the patient does not feel fatigued or unrefreshed by his loss of sleep. It also produced bursting headache.

I give a short *résumé* of the symptoms from two cases that have been greatly benefited by the use of this remedy, remarking that special interest attaches to them from the fact that both had tried many remedies in vain to find prompt and permanent relief from the *Phosphide of zinc.*

CASE I.—J. B. McK., merchant, about forty years of age, nervous bilious temperament. I copy from a note of his to me: "For five or six years I have suffered from extreme nervousness, affecting my head mostly, and upper part of spinal column; pain, sometimes in my neck, and up into the back part of the head; then, again, pain in my temples, as if something was pressing in from one side to the other on the brain; vertigo or dizziness always present; weak digestion, torpid liver; hands and feet always cold; one of the most distressing symptoms is that of fear." His mental condition was very annoying, being oppressed with an indescribable anxiety, or indefinable fear, a fear of something he knew not what; was easily startled. A prominent feature of both case No. I and No. II was, that a recumbent position always relieved the vertigo and improved the other symptoms. The above is but the outline of a series of unpleasant symptoms that medicine had failed to relieve. In February, 1875, I put him upon *Zinci phosphide*[3]. Under date of April 12th he says: "So much better have discontinued the medicine."

CASE II.—A physician, aged about sixty; in early life a sufferer from dyspepsia; was engaged in a large and arduous practice when taken. In the fall of 1863, when walking on the street he was suddenly attacked with vertigo, and from that a train of nervous symptoms manifested themselves until the patient was compelled to give up, in a great measure, his practice. The more prominent symptoms were headache, with binding feeling across brows, twitching of single nerves, a feeling of dizziness or unsteadiness, not amounting to actual vertigo, but more a dread of falling, such as is produced by looking down from a great height; weight and oppression in head; difficulty of thought; nervousness affecting particularly his handwriting; could with great difficulty write a very scrawling hand; an intensely bitter taste in mouth and throat at night; would often wash out the mouth during the night, without relieving this, "such bitter" taste; pain in sacral region; weakness of limbs, with great heaviness; cold hands and feet, with other nervous symptoms. After many consultations with his medical colleagues, in 1872 he commenced the use of *Phosphide of zinc*, with prompt relief.

PHYTOLACCA DECANDRA.

This is one of our most valuable and powerful indigenous remedies. Until subjected to scientific experimentation by our school, and its effects on the healthy discovered by means of provings, but little was known concerning its range of curative powers. The eclectics used it only in chronic diseases, such as chronic rheumatism and syphilis, under the vague idea that it was an "*alterative*." It always had a reputation among the common people as an excellent remedy for the former disease. The provings of this plant show why it gained a reputation in certain chronic diseases. I refer

you to the remarkable accidental proving in the first volume of this work. You will there find the reason of its usefulness in some severe cutaneous diseases.

But its curative powers are not limited to chronic diseases. It has proven one of our best remedies in many acute affections of the severest character.

I will give you some facts concerning its physical and chemical qualities, and narrate a few cases of poisoning, which will give you some idea of its powerful character.

It is said that caustic potash exists in this plant as a neutral salt, combined with some vegetable acid. This acid has been called *Phytolactic acid*, and is nearly related to *Malic acid*. The ashes of the plant is said to contain over 50 per cent. of Caustic potassa. The ashes have been applied to fungous and cancerous ulcers as an escharotic, and the inspissated juice of the plant (leaves, stem, and berries) acts in a similar manner.

The presence of Caustic potash in this plant is quite suggestive. It throws some light on its poisonous effects. Many of its symptoms and pathological effects resemble those of Causticum and the caustic alkalies. Taken into the stomach, this is probably soon freed from the acid and enters the circulation as Kali causticum. The plant, however, has other dynamic effects; it affects the nervous system powerfully, also the fibrous and osseous tissues. These chemico-dynamic effects cause deepseated and important lesions, as diphtheria, paralysis, periostitis, etc.

The early sprouts are often used for greens, but become cathartic as they advance to maturity. The officinal parts of this plant are the *roots*, *leaves*, and *berries*.

The *root*, which is more commonly employed, should be gathered in the latter weeks of autumn, cleansed from dirt and impurities, sliced transversely, and carefully dried. As met with in this shape, it is of a pale-brown color, rather darker externally; hard, corrugated, and distinctly marked internally with concentric rings of considerable thickness. It is inodorous, with a mild, rather sweet taste, succeeded by considerable acridity. Water at 212° F., or alcohol, extracts its medicinal qualities. The tincture made from the fresh root should be prepared with the strongest alcohol. If the dry root is used, the alcohol should be one-fifth water.

The *leaves* should be gathered just previous to the ripening of the berries. Dr. Pope, of Washington city, informs me that he got prompt and excellent curative effects, in diphtheria, from a tincture made from the leaves gathered late in the season.

The *berries* must be gathered when they are fully matured; they have a disagreeable mawkish taste, with a faint degree of acrimony, and are nearly inodorous. They contain an abundance of a beautiful dark-purple juice, which is the most delicate test of acids hitherto observed. An alkali turns it yellow, while an acid reinstates its purple color; but it is of a very fugitive nature, changing in a few hours and losing its delicacy as a reactive. No mordant has yet been discovered to fix it. It appears to contain sugar, will ferment, and yield a fluid from which alcohol may be obtained. The tincture should be made by adding equal parts by weight of the bruised berries and strong alcohol.

The following case of poisoning from eating the *berries* is quite suggestive:

I was called in, September 25th, 1865, to see a boy about eight years of age, who was suffering intensely from causes unknown to the parents. When I saw him he was in great agony; he complained of his stomach, saying *that it was pinched together;* nausea and violent vomiting. I examined the ingesta, and found the seeds and skin of the berries of the Phytolacca; the ingesta was of a dark-red color; he told me after he vomited that he had eaten poke-berries—"a whole lot of them." After the vomiting ceased he had severe purging; the stools were thin, dark brown; severe pain in the stomach on pressure, causing him to cry out. The vomiting and purging stopped in half an hour after I saw him. He afterwards complained of slight nausea, burning, griping pains in the umbilical region; dimness of vision; tongue coated white and spasmodic jerkings of the arms and legs. He was put to bed, and slept well all through the night. In the morning he was as well as ever. I forgot to mention that his throat felt sore, the fauces were congested and of a dark color; dryness of the throat; the tonsils were a little swollen.

Wood, in the "United States Dispensatory," says:

While the most prominent effects of Phytolacca appear to be produced on the stomach and bowels, the skin, the nervous system, and the urinary and genital organs of both sexes share largely in its influence. When given to animals in large doses it produces vomiting, purging, bloody stools, perspiration, drowsiness or stupor, cough, tremors, convulsive motions, increased urination, and distension of the abdomen. As an emetic it is slow in its operation, frequently not beginning to vomit in less than one or two hours after it has been taken, and then continuing to act for a long time upon both the stomach and bowels. The

vomiting produced by it is said not to be attended with much pain or spasm, but narcotic effects have been observed by some physicians, such as drowsiness, vertigo, and dimness of vision. In overdose it produces excessive vomiting and purging, attended with great prostration of strength and sometimes with convulsions.

Some eclectic authorities record its effects as follows:

This remedy (Phytolaccin), when taken by a healthy person, in half grain or grain doses, every two or three hours, for two or three consecutive days, produces a *burning sensation in the stomach, with tenderness of the bowels, and a peculiar heat in the rectum*, which is soon followed by *tenesmus, mucous and bloody discharges*. If continued it produces permanent *hæmorrhoids*, and sometimes dysentery. It will be observed from this that the specific influence of the Phytolaccin is manifested on the mucous membrane of the stomach, bowels, and rectum, especially upon the latter, and in small and medicinal doses is a most reliable remedy for chronic affections of this portion of the alimentary canal.

The sphere of action of Phytolacca includes the *skin, mucous membranes, fibrous tissues* (perhaps the muscular), *the periosteum, and the cerebro-spinal nerve-centres.*

In diseases of the *skin* it has been quite successful in removing some severe lesions. It appears to be useful in those which resemble the manifestations of *secondary syphilis*. It has cured *psoriasis, pityriasis, tinea capitis, lupus*, and the squamous eruptions in general. In this respect it resembles Arsenicum and Mercurius, particularly the former. It resembles the latter in its power to *cause*, as well as cure, certain eruptions similar to the syphilitic.

Dr. Searle, of New York, has found it specific for a tendency to boils, especially when they are very painful, and appear on the back and behind the ears. It is equally useful in *carbuncle* and *malignant pustule*. It has caused and cured *lichen*-like eruptions with great itching of the skin.

It appears to produce similar lesions on the *mucous surfaces*, and it is eminently successful in *ulcerations* of that membrane in any part of the body, but particularly in the *nose, throat*, and *rectum*.

One of its earliest popular uses, and one which has been verified by the experience of many physicians, is its curative power over affections of the *fibrous tissues and the periosteum*. These affections are generally *rheumatic* or syphilitic in their nature. It not only

affects the fibrous coverings of muscles, but the fibrous envelops or sheaths of the nerves. In this respect it bears a close resemblance to Mercury, the Iodide of potassium, and Causticum.

In the various forms of *chronic rheumatism* affecting the above-named tissues, and even the synovial, it has effected some notable cures. I have known some remarkable cures of this disease to be made by the domestic use of the berries macerated in whiskey. Of the many cases reported in our journals, I will mention a few of the most notable.

The late Dr. Kendall mentions a case of *periosteal rheumatism* in a young girl, who had suffered several weeks from nightly pains in the tibia, cured by a few doses of the 1ˣ.

Dr. Kimball, of Sackett's Harbor, N. Y., writes:

In two cases of rheumatism of the lower intercostal, extending to the abdominal and lumbar muscles, from exposure to cold and dampness, the Phytolacca operated like a charm, two doses of the mother tincture being sufficient. In another case, ushered in by a diarrhœa, one dose, suffered to act twenty-four hours, gave no relief, although it caused considerable irritation of the throat and fauces. This case was afterwards cured by Ranunculus bulb. 30th.

In the "Boston Quarterly," vol. i, No. 4, is a case in which the Phytolacca decandra was used by Dr. S. M. Cate, with good effect, for occasional spasms of the stomach and diaphragm for some years, and for the last six months a severe pain in the hip-joint, mostly behind the trochanter major. The pains were sharp, cutting, and drawing, and commenced at 4 or 5 o'clock in the morning, driving the patient immediately from his bed. On first rising, the leg was drawn up so that only the toe would reach the floor. Rubbing and heat would afford some slight relief, but energetic walking was the only means of rendering it endurable. After a few hours in the morning, the severe pains passed off, and only a soreness and dull pain disturbed him till the next morning. The pains sometimes appeared in the middle of the tibia and fibula, and down to the great toe.

Dr. O'Brien, of South Shields (England), in his mention of Phytolacca, says:

In a case of *syphilitic rheumatism*, with enlargement of the parotid and submaxillary glands, it produced prompt relief, and a rapid subsidence of the glandular tumors also. In a case of *rheumatism* of the right frontal region, ac-

companied by nausea and aggravation of the pain in the morning, relief was afforded after one dose of the *Phytolacca*, 3d dec. dil.

Dr. P. H. Hale reports the following cure of a severe case of *chronic rheumatism* treated with Phytolacca:

Mrs. S——, aged about forty, had a severe attack of inflammatory rheumatism fifteen years ago, which ran into a chronic form, affecting the left hip-joint, which she lost the use of. Upon examination the synovial membrane was found implicated, with considerable tumefaction from the effusion. The patient was of a scrofulous diathesis. I ascertained she had enlargement of the glands of the neck and axillæ, which had existed since she was a child.

There was no swelling of the *limb;* the pain was obtuse, heavy, aching, generally worse in damp weather. She complained of coldness of the limb, and the pain was aggravated by warmth. She was very much emaciated, and had nightsweats, having an acid reaction. Urine scanty most of the time, but sometimes very clear. She had not walked without assistance for fifteen years.

Prognosis unfavorable; but concluded to give the Phytolacca a fair trial. Gave the tincture of the ripe *berries*, thirty drops, three times a day.

In two weeks I saw her for the second time, and she seemed very much benefited; less pain, the tumefaction of the hip had nearly disappeared, the muscles of the thigh had relaxed, and she had greatly improved. In a few weeks, under decreasing doses, she recovered the use of her limb.

In this case the Phytolacca not only relieved the pain and tumefaction, but dissipated the glandular enlargements, and arrested the nightsweats. In all my ten years' practice, I have never witnessed a more satisfactory cure.

Dr. Neidhard finds it useful in *arthritis vaga*, or wandering gout, passing from one joint or place to another, with swelling and redness. He uses the 6th dilution.

Dr. Cushing, of Lynn, Massachusetts, sends me two cases:

CASE I.—Mrs. B., aged forty-five, has had *rheumatism* for several years; the past year the joints of all the fingers have been badly swollen and very painful, hard and shining, Gave Phytolacca 3d, six globules (No. 4), four times a day; pains and swelling better, but complete loss of appetite; gave four globules, night and morning, appetite returned; gave four globules four times a day, is much better and improving; general health much better.

CASE II.—Mr. H., aged forty, blacksmith; *chronic rheumatism*, severe for several months; gave Phytolacca 3d, six globules (No. 4), night and morning. In ten days nearly well. *Went to the war.*

Dr. A. R. Smart, of Hudson, Michigan, writes as follows:

The sphere of Phytolacca in rheumatic affections appears to be in the fibrous tissues covering the bones and nerves. In the rheumatic irritation of the sheaths

of the nerves, as in *sciatic rheumatism*, it is specially useful; also, in periosteal rheumatism, and in periostitis. A leading indication for its use in periosteal rheumatism is the presence of a syphilitic taint, which may be supposed to originate the troubles in the osseous structures. The preparation used in the following cases illustrative of its action, was a concentrated tincture of the berries. This seems to vary in its action from the preparation of the root. I have failed in accomplishing cures with tincture of the root, and afterwards have succeeded with tincture of the berry. This difference in effect and sphere I have never noticed in any of the affections to which the Phytolacca seemed homœopathic other than those above mentioned.

CASE I.—A man aged forty, somewhat predisposed to rheumatic difficulties, presented these symptoms: He had nearly constant pain in the outer and back part of the right limb, worse at night, but never going away entirely; unable to bear any weight on the limb, or to move it without extreme pain, which he describes as dull, aching, and at times lancinating in character. The pain first came on in the hip, and from thence into the lower portion of the limb. Says he had a similar attack fourteen years previous, from which he did not recover in over one year. General health is very good; has tried cold friction to the limb and *Iodine lotions*, etc., and has used *Colchicum*, *Cimicifuga*, and *Arnica*, without benefit; gave Phytolacca (concentrated tincture of the drug), beginning with ten drops, and gradually increasing to half a teaspoonful. After using the Phytolacca four days he reported himself better, and steadily progressed to a cure, although it was six weeks before he could resume his business.

CASE II.—A boy ten years of age, after exposure to cold and wet, was taken with periostitis of the right femur. He was treated by a neighboring physician (allopath) for rheumatism. The inflammation was partially subdued, and the case ran on for five months, when he came into my hands. I found the limb greatly swollen, surface red and shining; inability to stir the limb; considerable pain, more in the latter part of the day; chills occasionally, and nearly constant fever; no appetite; furred tongue. After a trial of several remedies, which seemed to fail to reach the case, I prescribed Phytolacca (same preparation as before), 20 drops every four hours, and a fomentation of the same to the limb. Under this treatment the swelling in the limb subsided, leaving some necrosis, which gradually came away, under nearly the same treatment, with the addition of some supporting medicines.

CASE III.—A man who had syphilis a year before, complained of pain in the arms, and always about midway between articulations, especially about the attachment of the deltoid; has suffered about a month; does not think he caught cold; can assign no reason for the difficulty. Pain is not severe, but of a dull aching character, aggravated at night. Gave him Phytolacca, 20 drops, three times per day. Four days after he reported freedom from pain after the first day's use, and six weeks after he still continued free from difficulty. In regard to the dose given, I would say that I have repeatedly failed in deriving the advantage from doses of one to two drops that I afterwards found, in the same cases, from the use of 10 to 30 drop doses. Dilutions of the tincture of the berries I have never used.

Nervous Tissue.—The Phytolacca has been known to cause convulsions in men and children. Dr. Burt's experiments on animals elicited many convulsive symptoms. According to Dr. King, it causes "a tingling and prickling sensation over the whole surface." In its pathogenesis we found many neuralgic pains, which are clearly distinguished from the myalgic. No post-mortem examinations have been made of men or animals poisoned with this plant, with sufficient accuracy to point out the peculiar pathological conditions it causes. The case of poisoning resulting in *tetanus* would indicate its probable usefulness in that disease.

Vascular System—Heat, Fever, etc.—Neither of our provings contain any mention of the effects of Phytolacca upon the vascular system. I find no "fever symptoms," and but one "heart symptom." "Occasional shock of pain in the region of the heart; as soon as the pain in the heart ceases a similar pain appears in the right arm." This is quite a valuable symptom, as it appears in some rheumatic affections, and may indicate grave cardiac disease. I find no mention of its use in any form of fever except scarlatina; it is probable, however, that a remedy of such power will be useful in some febrile diseases.

It is esteemed very highly in *glandular affections.* In our pathogenesis we find the following symptoms:

A very peculiar tension and pressure in the parotids; hardness of a gland on the right side of the neck, suppuration of a tumor behind the right ear, with a discharge of matter and blood.

Dr. Burt found the Phytolaccin to cause swelling and inflammation of the tonsils. Several homœopathic physicians, with myself, have found it useful in swelling and induration of glands; it seems to have a specific affinity for the mammary glands. The root excites the whole glandular system, and has been highly extolled in syphilis, scrofulous and cutaneous diseases. It is said to hasten the suppurative process; it has been used with alleged success in bronchocele. The Phytolacca is an analogue of Mercury, Iodide of potash, Baryta, Podophyllum, Arsenicum, and other similar drugs. It is strange that a vegetable remedy should be so analogous in its action to the Iodide of potash. One symptom is quite notable—the loss of adipose tissue in birds which

have eaten of the berries. Kali hydriodicum has this power of causing absorption of adipose matter in a great degree; so also both are useful in periosteal, mercurial, and so-called syphilitic rheumatism.

"An inspissated juice of the leaves has been recommended in indolent *ulcers*, and as a remedy in *cancer*." According to Coe,

> Phytolaccin has been much employed in the treatment of carcinomatous affections. It is undoubtedly as efficient an alterative as can be safely employed in that disease; its beneficial effects are most apparent in cases of open cancer. The patient's system should be freely brought under its constitutional influence, and the dry Phytolaccin applied to the ulcer. The Phytolaccin applied either in the form of a paste with water, or in strong alcoholic solution, has been found quite effectual in that species of cancer known as lupus, when used in the early stages.

Eclectic physicians advise the use of Phytolacca decandra in old, indolent and *fistulous ulcers*, both as an external and an internal remedy. I have found it fully equal to our best antipsorics in the treatment of old ulcers, even when of a syphilitic nature; in this respect it is a congener of Silicia, Lachesis, Arsenicum, Kali hydriodicum, Kali bichromicum, and Sulphur.

The symptoms of the sensorium and head are worthy a close study. In *rheumatic* and *syphilitic* (possibly mercurial) affections of the cranial envelope, it will be found one of our best remedies.

The Phytolacca has a large number of symptoms of a prominent and suggestive character, relating to the eye, and affecting its various tissues. It is eminently indicated in rheumatic, catarrhal, scrofulous, mercurial, and even syphilitic ophthalmia. I have used it with success in one case of rheumatic pain in and about the eye, and another of chronic conjunctivitis with granulation.

In the "Chicago Medical Examiner" is the following mention of the curative virtue of Phytolacca in *granular conjunctivitis*. Although from allopathic sources, the testimony is worthy our consideration. In this cure, as in all others, the pathogenesis of the medicine proves its homœopathicity to the disease.

Dr. C. S. Fenner, of Memphis, Tenn., in the "N. A. Med.-Chirurg. Review," January, 1857, highly extols the efficacy of the Phytolacca, in preventing relapses of inflammation in granular lids. He says:

Regarding these exacerbations, accompanied with circumorbital pain, soreness in the periosteum and scalp, as of rheumatic origin, about two years ago I was induced to try the Poke, from its well-known efficacy in rheumatic inflammations, and the result has thus far exceeded my most sanguine expectations. With the aid of this remedy I have been enabled to effectually cure cases of granular conjunctivitis, that, without it, would have resisted all my efforts; indeed, with me it has almost proved a specific for the exacerbations attending this complaint. Patients fully under the influence of Phytolacca often expose themselves, and take a severe cold without affecting the eyes in the least. I use the root in the form of a simple decoction or tincture, and give it in large enough doses to produce fulness of the temples and head. I have not yet seen a severe recurrence of acute inflammation in this disease where the patient was kept fully under the influence of the Phytolacca.

An allopathic physician claims to have effected several cures of *fistula lachrymalis* with Phytolacca. I cannot find the paper which makes mention of it in such cases, and therefore the manner in which it was used is not known to me. But, as in granular conjuctivitis, it was probably used topically and internally.

I have cured with Phytolacca several cases of granular disease of the lids, which had resisted the best treatment of several oculists of both schools. Give five drops of the θ or 1^x (fresh-root tincture) four times a day, and a few drops in the eye of the following mixture: Simple syrup, ℥j; Tincture phytolacca, ℥j.

In scrofulous swellings of the glands of the eyelids, it rivals Hepar sulp.

It is efficacious in *ulcerated sore mouth, toothache* (rheumatic or neuralgic).

A well-known physician writes me:

I have made considerable use of Phytolacca in *difficult dentition.* Have found it to act in most cases like magic. In one very bad case (my own child), I had for a long time tried everything that promised to be of service, without any permanent relief. The following symptom, in its pathogenesis, suggested its use to me: "irrestible inclination to bite the teeth together," etc. Its administration was followed by prompt relief. I have since used it in other cases with equal benefit. I used it in the 12th dilution.

If you will consult the pathogenesis of this drug, you will be surprised at the severity and gravity of the symptoms of the *throat* and *fauces.* They give a very good picture of *diphtheria, follicular tonsillitis, ulcerated sore throat,* and *catarrhal pharyngitis.*

Since the appearance of the first edition of this work the value of Phytolacca in diphtheria has been verified by thousands of physicians of the homœopathic school in England, Austria, Australia, Germany, and other countries, as well as our own.

To Dr. Burt rightfully belongs the honor of first recommending this remedy in the treatment of diphtheria. As stated in the *first* edition, his recommendation was made to me during his heroic proving of the medicine. Those who undertook to sneer at the claims of Dr. Burt set forth for this medicine, may well feel abashed when they see the great amount of evidence in its favor. Future generations of physicians, and innumerable patients, will remember Dr. Burt with heartfelt gratitude.

The kind of *diphtheria* to which the Phytolacca is homœopathic is probably *not* that known as *malignant*. There is one symptom which is rarely present in the Phytolacca diphtheria, and always present in the malignant variety, namely, *the peculiar fetor of the breath*. When this is present I prefer Lachesis, Merc. cyanuret, or Merc. biniod.

It has been alleged that Phytolacca will not cure *true* diphtheria. Those who have tested its value know the assertion to be untrue. True diphtheria is not always malignant. The malignant variety is usually caused by exposure to noxious gases, sewer emanations, etc., and requires the above-named remedies, together with gargles of Carbolic acid, Borax, Muriatic acid, or Baptisia.

The diphtheria in which Phytolacca is indicated is generally *epidemic*. It usually has a catarrhal or rheumatic origin—is brought on by exposure to a cold and damp atmosphere, or sleeping in damp, ill-ventilated rooms.

The symptoms partake of a rheumatico-catarrhal character. It commences with very severe pains all over the body, apparently in the bones. The soreness and pain in the limbs, back, neck, and head is very severe. There is high fever, mixed with chilliness, and accompanied by great weakness. The pain in the throat is chiefly at the *root* of the tongue and in the tonsils, extending to the ears. The exudation, or pseudo-membrane, is pearly-white or grayish-white; rarely is it brown or yellow, like chamois skin (Kali bich.), or ash-colored (Lach., Lyc.), or greenish-black (Merc.).

In this estimate of the value of Phytolacca in diphtheria, I

agree with Dr. Hughes, of England ("Manual of Pharmacodynamics"), who says: "But they (the Phytolacca cases) seem to bear to the really dangerous form of the disease much the same relation as scarlatina anginosa to scarlatina maligna."

Even in the malignant variety I believe the Phytolacca may be of service if alternated with more powerful remedies. But in whatever kind it is given, I advise you to rely on appreciable doses, not less than twenty or thirty drops of the 1ˣ tinc. of the fresh root in half a goblet of water, a spoonful every hour or two.

Doubtless many practitioners carelessly, or ignorantly, mistake cases of *ulcerative angina* or *follicular tonsillitis* for diphtheria. A casual glance—and that is all that is often given—may disclose no difference in *appearance;* but a close examination of the fauces, or of the membrane under the microscope, ought to leave no doubt. Many of the cases reported as diphtheritic, doubtless belong to other conditions.

Phytolacca corresponds to the *ulcerative* process everywhere, the suppurative process, also to inflammation of glandular structures.

It is therefore indicated, pathologically, in *quinsy, follicular sore throat,* and *ulceration of the tonsils and fauces.*

I have seen cases of catarrhal inflammation of the head and throat which closely simulated diphtheria. On exposing the fauces I have seen what appeared to be a large patch of diphtheritic membrane upon the posterior wall of the throat, but a close examination would prove it to be a tough, white mucus from the posterior nares, clinging tightly there. Phytolacca is curative in this condition; so also is Lobelia cerulea and Bromide of ammonia.

The observations of Dr. Sherwin, of Sydney (Australia), go to prove that another species of this plant is also useful in diphtheria. He writes:

Phytolacca octandra grows in great abundance all round this city, but not indigenous. This is a most valuable plant, used either internally or externally. It is specific in diphtheria—given in decoction or infusion—applied very assiduously to the fauces as a gargle, and used hot and frequently repeated as a poultice to the throat; all stiffness disappears; the membranaceous formation is thrown off and is not reproduced; perspiration follows; fever subsides; all aching, general pains, and headache disappear, and the patient eagerly seeks for food.

The *gastro-intestinal* symptoms of Phytolacca bear a close resemblance to those of Arsenic, Veratrum album, Podophyllum, and Ricinus. The following cases of poisoning illustrate its toxic effects:

Dr. Bahrenburg's Accidental Proving.—I ate a small piece of the root, about the size of a common cherry, and also gave small portions to several of my friends. This was a little before twelve o'clock. Soon after, all who had eaten it began to vomit. The matter rejected was first of the aliment, and then a dark bilious substance, which came away with as little effort as vomiting in Asiatic cholera. Vomiting and purging continued all the afternoon, with considerable griping pains and cramps in the abdomen. The emesis took place every fifteen or twenty minutes. Toward evening we were confined to our beds, and the whole family alarmed, thinking we would die. The extremities were cold, pulse very low, eyes deeply sunk in their orbits, and vomiting and purging still continuing. I was asked if I knew any antidote. I told them there was no danger; but toward night, as our situation became rather serious, I ordered some black coffee, and after this the vomiting ceased, but the purging continued. We all passed a restless night, with some fever, as reaction had taken place. There was considerable thirst and the passages were without pain. The next morning all the dangerous symptoms had passed off. We felt very weak, especially in the abdomen, with little or no appetite for several days, during which time the diarrhœa continued. One of the persons, who had suffered from sick headache for several years, which occurred once a week, had none for four months, when it returned, but much modified and lighter.

Another experiment had from an overdose:

Vomiting of undigested food, and violent vomiting at intervals of ten or fifteen minutes. Pain in the head increased by vomiting, nausea relieved by vomiting. Dull, bruised pain in occiput. Constant flow of salivary secretion from mouth, throat, salivary glands much increased, and of a thick, tenacious, ropy consistency. At twenty minutes past six o'clock I vomited an acrid substance, which caused a feeling of scraping and excoriation in the throat. Cool perspiration, especially on the forehead and hands. Great muscular debility, lassitude, and desire to lie down. Until seven o'clock P. M., continued acrid vomiting. Drank a glass of warm water to prevent the empty retching, which was becoming very painful. Muscular weakness increasing. Cool perspiration. Headache through the whole head of a dull pressing character. Feeling of warmness and excoriation in the throat. All symptoms were worse on motion and in the open air except the headache, which was better in the open air. At half-past seven o'clock drank another glass of warm water and in ten minutes vomited again. At this time, vertigo, dizziness, and dimness of vision began to be manifested; objects appeared dim and indistinct.

These cases give a good picture of *cholera* attacks. In fact, the

Phytolacca is one of our best remedies in *cholera morbus, cholera infantum,* and those *choleraic* cases caused by bad atmospheric conditions, and properly designated as *gastro-enteric catarrh.*

Instead of causing copious dejections upward and downward, the Phytolacca sometimes spends all its primary force on the cerebro-spinal system. In a case of poisoning reported by Dr. Griggs,—

> His extremities were stiff; hands firmly shut; feet extended and toes flexed; eyes bleared and dancing; pupils contracted; lower lip drawn down; teeth clenched; lips everted and firm; muscular rigidity was general and opisthotonos established. The circulation numbered 85 beats per minute; pulse soft and unresisting; temperature nearly natural; respiration difficult and oppressed; mucous râle distinct and audible anywhere in the room. The contraction of the masseters precluded the idea of addressing remedies by the mouth, and the amount of mucus in the bronchiæ that of administering anæsthetics. After an hour he had increased muscular rigidity generally, with convulsive action of the muscles of the face and neck (the chin drawn closely down to the sternum), which condition would last five or ten minutes, to be succeeded by partial relaxation and return in twenty minutes more with the same violence.

In this case the child recovered without emesis or catharsis. There was retention of urine for a day. Attacks similar to this often occur in children, as a substitute for cholera infantum. In other words, if the morbific influence which causes that disease does not act on the gastro-intestinal canal, it strikes the cerebro-spinal system.

Phytolacca has rendered good service in *dysentery, hæmorrhoids,* fissure of the anus, and ulceration of the rectum.

It is homœopathic to *albuminuria,* especially after diphtheria and scarlatina, and may prove useful in *morbus Brightii* and other chronic renal diseases.

The Phytolacca ought to prove curative in many diseases of the *uterus, ovaries, testicles,* and other portions of the genital organs.

In my estimation the sphere of action of Phytolacca is principally upon (*a*) the glandular system, (*b*) the serous and fibrous tissues, and (*c*) the mucous membrane.

Phytolacca has a specific effect upon the thyroid and mammary glands, also parotids and other glands of the throat, and by analogy ought to act powerfully upon the ovaries and glands of the cervix (also the testes). Accordingly it ought to prove curative in ovaritis,

and other affections of those glands, such as neuralgia, etc.; in uterine leucorrhœa, or that variety which proceeds from the glandular portion of the cervix. Its powerful influence over ulceration should make it curative in ulcerated os uteri, whether of a non-specific or specific charater. Finally, it should cure rheumatic affections of the uterus. The metrorrhagia and frequent menstruation mentioned above, may have proceeded from ulceration of the os; dysmenorrhœa from rheumatic irritation, and the leucorrhœa may have had a glandular origin. In organic affections of the uterus, as tumors, cancer, scirrhus, ulceration, I would strongly advise the Phytolacca internally and locally applied, and its use persevered in for some time. The action of Phytolacca on the mammary glands is specific. In No. 84, page 201, of the "British Journal of Homœopathy," will be found an article from my pen, which covers this subject as much as the present state of our knowledge will permit. I would urge upon physicians to test its virtues in the various diseases of the mammæ. Since the article was published I have used it successfully in many cases of inflammation of the mammæ, as well as tumors and nodosities in these glands:

It is the intention of the writer to call attention to only one particular use of this remedy, viz., *in certain diseases of the mammary glands.*

The various writers on Materia Medica of the dominant and other schools *not* homœopathic, while they recognize its value in diseases of the glands, do not mention this particular sphere of its action. In the provings we find the following symptoms:

"*Inflammation, swelling, and suppuration of the mammæ.*" But I am not aware that this symptom has ever been put to practical test by homœopathists, with the exception of Dr. Hill, who recommends it in some diseases of the breast. (See Hill and Hunt's "Surgery.") My experience of the drug dates back nearly fifteen years, before I had seen the proving referred to, or, indeed, any published statement of its value as a medicine.

When I was a student of medicine in my father's office (he was then an allopath), a neighbor had a valuable cow, which, after a clandestine confinement, was brought home from the woods with a most enormously swollen udder. It was as hard as a stone, intensely hot, painful, and sensitive, and not a particle of milk could be drawn. In much anxiety the owner came to his office and asked my father to suggest something to discuss the swelling and engorgement. A dose of Epsom salts was administered, but after twenty-four hours the cow was worse than before. At this juncture an old woman of the neighborhood brought in a piece of a large, white, succulent-looking root, which she called *scoke*, and ordered the farmer to cut a portion of it up finely and give the animal in some "bran mash." Another,

the larger portion, was made into a decoction, and the cow's udder washed with it frequently. The effect was magical! In less than twelve hours the milk could be drawn, the gland softened, and in a few days the morbid condition was removed.

This incident was nearly forgotten until a few years after, when I was engaged in practice, and was having trouble with mastitis and abscess of the breast in persons of my patients. I found the remedies laid down in our books notoriously and obstinately inefficient. In spite of Aconite and Belladonna in high and low attenuations, the inflammatory engorgement would run on to suppuration. I then tried larger doses and other remedies, among which the *Kali hydriodicum* was most valuable; also topical application of Belladonna, Arnica, Iodine, etc., after the manner of the dominant school, and will give them credit of preventing much suffering and deformity. But I determined on making a trial of the virtues of Phytolacca, and before I commenced its use, made inquiry among the farmers of my acquaintance, and found to my gratification that it was considered a specific in all cases of inflammation and engorgement, "caking" of the udder of cows and even mares.

The next case of engorgement of the mammæ which came under my care was an aggravated one. The woman, the mother of several children, had had "broken breasts," with every confinement, and the cicatrices in the glands bore testimony to the truth of her assertion. About four days after delivery she had a severe chill, followed by some fever, and in a few hours both mammæ were hard, swollen, and painful. The child made ineffectual efforts at nursing, the nipples became very sensitive, and she was in much distress for fear of the inevitable sufferings apparently in store for her. Here was a case wherein to test the efficacy of the Phytolacca. Ten drops of the first decimal dilution were administered every hour, and a lotion was prepared by adding one-half ounce of the tincture to one-half pint of water. This was applied constantly by means of folds of cotton cloth laid upon the breasts. In the course of the next twenty-four hours I had the satisfaction of finding some signs of resolution. The heat, pain, and swelling became less, and in a few days, with the aid of low diet, and careful extraction of the milk, the woman recovered with only a small abscess at the side of an old cicatrix, instead of extensive suppuration as usual. Since that time I have used it in very many cases, with the same excellent results, and it is only in the severer forms, accompanied with erysipelatous inflammation, that I have had resort to Belladonna internally and externally.

But the Phytolacca is not only useful in simple and inflammatory engorgement, causing rapid suppuration, but it is valuable in those cases where suppuration is already commenced. Here it reduces the inflammation, increases the activity of the absorbents, and will often condense an apparently large abscess in the smallest dimensions.

It is often the case that neglected or ill-treated mammary abscesses degenerate into ill-conditioned, fistulous ulcers. In such cases I have seen the best effects follow the judicious use of this remedy.

CASE I.—A young woman, a *primipara*, very corpulent, with very large mammary glands, was taken with chills and fever a few days after confinement. The family were poor, and lived a long distance in the country; no physician was

called, and nothing was properly done, but very improperly the breast was poulticed for nearly two weeks, when several large abscesses opened spontaneously, and discharged enormous quantities of unhealthy pus. Six weeks afterwards she came to me for advice. The breast affected was a loathsome sight, long, pendulous, distorted, the seat of large fistulous ulcers, discharging a watery, fetid, ichorous pus; the gland was full of hard, painful nodosites, of the size of a walnut and larger. I suspended the breast by the application of long strips of adhesive plaster, placed in various directions across and around the gland, and prescribed ten drops of Phytolacca first, four times a day; also a preparation of one-half ounce of the tincture to eight ounces of distilled water, to be thrown in the fistulous canals with a small glass syringe; this treatment, together with better diet and a little wine, so much improved the case in a week, that but one small ulcer remained open; and in a fortnight the treatment was suspended. The gland will never return to its normal condition, but will probably retain its irregular shape and knotty feel.

CASE II.—A woman, aged forty, applied to me to be treated for what had been declared an "open cancer" of the breast. It originated one year previously, after the birth of her seventh child, and was the result of a neglected abscess. The ulcer was an inch in diameter, gaping, angry, filled with unhealthy granulations; a probe passed obliquely downwards until it reached a hard sensitive tumor about the size of a hen's egg; the discharge was offensive and sanious. The case was treated by suspension and compression, and the use of Phytolacca as above. Cured in two weeks.

Many similar cases might be cited, but these will suffice, as they are good examples of the many cures made with this remedy.

It may be here mentioned that the local application of this remedy is useful in cracked and excoriated nipples. It should be given at the same time internally. If the fissures are syphilitic in their origin, this remedy is still useful. I once treated a case of irritable tumor of the breast as described by Sir Astley Cooper. It had been present several years, and was very sensitive and painful, most especially at the menstrual periods; the pain extended down the arm of the affected side, and at times causing a sympathetic enlargement of a gland in the axilla. I administered Belladonna, Conium, Phosphorus, and Iodine, but without any good result, and the patient left me. A few months after, I learned, to my intense mortification, that an old woman had cured it with a plaster of the inspissated juice of the berries of the Phytolacca. Since that occurrence I have treated several cases successfully with the Phytolacca internally, giving the lowest dilution, and sometimes the mother tincture. In one case I permitted the patient to use a salve of the juice of the berries mixed with mutton tallow. This she applied constantly over the site of the tumor. Whether it hastened the cure or not I cannot say, at least its application did no harm, although it seemed capable of causing some vesications on the skin.

The same old lady above mentioned had quite a reputation for curing "cancers," and with no other application, as I was assured, than the extract of Phytolacca. I have known the finely powdered root, when applied to fungous growths, have the effect of changing such abnormal into normal or healthy ulcers, which soon healed.

I have found it useful in encysted tumors; in recent indurations; and even in scirrhus of the breast; nor should I be surprised if further trials should show it to be useful in cancer of the mammæ.

In those cases of irritable mammæ where there is no swelling, induration, or tumor, only a painfulness at the menstrual period, I have found it specific in a few cases. The menses became more natural, and the pain in the mammæ ceased. The question here arises: Why will it not prove valuable in certain diseases of the testicles or ovaries? When we consider the physiological relation of the ovaries to the mammæ, we should incline to predict it will be found useful in many ovarian diseases.

To the above article I would add, that the root is in general use among dairymen in the country, to regulate *any* abnormality in the milk of cows. If the milk be scanty, thick, watery, curdy (flocculent), or contains blood or pus, or becomes in any way unnatural, they give the green root, or a decoction in small quantities, and the effect upon the milk is generally favorable. This should suggest its use in abnormal conditions of the milk in women, giving it in the lower dilutions. The higher might be tried in some peculiar cases.

In *neuralgic* affections of the breast it has been found curative. Irritable mammæ is one of the most distressing of all disorders; but the internal and external use of the Phytolacca will often give prompt relief, as it did in the following case:

Mrs. W., aged twenty-two years, second child, delicate, nervous temperament, was affected the second day after confinement with excessive flow of milk, the secretion being so profuse that it would saturate a large-sized napkin every two or three hours, besides what a healthy child nursed.

Her nipples were so sensitive that when she put the child to the breast it produced intense suffering, seeming, as she said, to start from the nipples and radiate over the whole body, going to the backbone and streaking up and down it, causing unbearable pain.

The profuse discharge was causing great exhaustion, and she was feverish and restless, and unable to nurse.

I once suggested the Phytolacca as a remedy in *fatty degeneration of the heart* and *fatty heart.* (Birds which feed on the berries lose all their adipose tissue.) Some physicians allege that they have seen good results from this medicine in the above conditions. I believe it has relieved cardiac disorders due to rheumatic irrita-

tion, especially when the pain is felt in the *right*, instead of the left arm.

PILOCARPUS PINNATUS.

Jaborandi has but few if any close analogues in our Materia Medica. I shall not attempt to give a complete account of its pathogenetic or therapeutic power. I will merely mention that it has been found to be curative in *rheumatism, asthma, bronchitis, dropsy, ascites, uræmia, desquamative nephritis*, and other diseases of the mucous membranes.

It has been useful as an aid to labor, and of value in diseases of the breasts and other glands.

This new and unique drug has not yet attained any considerable prominence in the therapia of the homœopathic school. Dr. Allen, in the "Encyclopedia of Materia Medica," has given us a very extensive pathogenesis, and in due time we shall probably have some trustworthy clinical experience. From this pathogenesis we learn that its general primary symptoms all point to *paralysis of the vascular centres, resulting in general arterial congestion*. This congestion, however, is not *active, i. e.*, it is not attended by *increased* blood-pressure. There is really a *lowering* of the vascular tension. There is also a *lowering* of the temperature, often as much as 2° F. But its specific and peculiar action is the extraordinary effect which it has on the end-organs of the excito-secretory nerves. Shortly after taking the drug a general flushing of the whole body takes place (as in Amyl), and then all the cutaneous and glandular secretions are increased. Profuse and drenching *perspiration* sets in; an enormous amount of saliva is poured out, often several pints; the nasal and bronchial mucus is increased; tears flow abundantly.

Often the intestinal mucous membrane is excited, and a severe diarrhœa occurs. The urine is often greatly increased, as are the uterine and vaginal mucus.

The above is a picture of the prominent primary effects of the drug, but by consulting the various experiments made, I find a series of secondary actions, as follows: After the perspiration, etc., ceases, a chilliness sets in; this is often followed by headache,

pains all over, feverish heat, dry skin, suppression of cutaneous and glandular secretions, etc.

The homœopathic use of the drug is therefore not confined to those diseases having symptoms similar to its primary action, but to those possessing symptoms *similar to both* its primary and secondary. Let us imagine a case wherein Jaborandi is fully indicated. A man exercises violently until he perspires freely. His face and whole body is flushed; his eyes are red and tearful; his saliva flows freely. He then sits down in a cool place, and soon feels chilly. In a short time his skin becomes hot and dry, his mouth and throat are dry, and he has slight dry cough, with oppression of breathing. In such cases some active internal congestion is to be found. Aconite is usually given in such cases, but I believe Jaborandi in the 1^{x} dilution is the more appropriate remedy.

With this preamble, I propose to mention some of its uses in obstetric practice. Dr. Allen gives no clue to its action on the genital organs, but of late several German experimenters have investigated its action in that direction.

Reasoning from analogy, we must conclude that Jaborandi must cause passive arterial congestion of the uterus, with stimulation of its excito-secretory nerves. It must excite the glandular and mucous tissues to pour forth a large amount of secretion, and excite its muscular tissues to involuntary contraction.

Experiment has substantiated this view. Dr. Sænger, of Leipsic, reported to the German Gynæcological Society, that he has given Pilocarpin* to many women in labor, and to the non-pregnant, and finds that it causes "premature occurrence of menstruation," and "the inception of ecbolic activity." In women in labor "the genitalia become softer and more moist and diarrhœa sets in." Dr. S. says: "Ergot produces spasmodic, pilocarpin rhythmical contractions of the uterus" (in this resembling Caulophyllum). "Pilocarpin, therefore, has a qualified ecbolic influence." "Atropia," he says, "arrests the pain caused by Pilocarpin." He further explains the sphere of Pilocarpin: "If a *tendency to expulsion* be already present, for instance, pathological relations between the

* Pilocarpin is the concentrated active principle of Jaborandi.

uterus and ovum, then Pilocarpin is an ecbolic. Practically, therefore, it would be advantageously used when a labor has already imperceptibly begun. During labor proper it *regulates and stimulates uterine activity.*"

I would further define its scope by adding that it would seem that to be fully indicated the labor must have been some time progressed, but that owing to some disordered condition of the vascular or nervous systems, *the pains become irregular in force and rhythm*, the vagina becomes dry and hot, the cervix dry and unyielding, and there is a general condition of feverish restlessness.

In other words, the primary normal state, simulating the primary symptoms of Jaborandi, has passed away, and a secondary abnormal state has set in. In such cases, doses of 1 or 2 grains of the 1^{x} tincture of *Pilocarpin* will doubtless act curatively, and carry the labor to a normal termination. I hope my colleagues will test the remedy and report the results. My own experience with it in labor is not sufficient to enable me to report formally.

I have, however, used it in a class of cases which had heretofore given me much trouble. I allude to those women who have a constant dry, non-perspiring skin, a dry mouth, and a generally deficient glandular inactivity. Such women usually suffer *from very scanty menses*, and in proportion as the menses are scanty, symptoms of arterial fulness obtain.

In such cases a few drops of Jaborandi, or a few grains of Pilocarpin 2^{x} tincture, given four times daily, for a week before the expected menses, frequently causes them to appear in proper amount, and at the same time induces a soft perspiring condition of the skin. Experience has proved it to be of great value in the lying-in room, when the lochia becomes scanty or suppressed, and the flow of milk ceases or refuses to appear. After its administration the lochia returns and the milk appears abundantly in the breasts.

In confirmation of the power of Jaborandi on the impregnated uterus, I quote the following from a German journal:

Dr. Chadzynki, after stating that he has witnessed very favorable results by treating skin diseases, such as psoriasis, syphilis, etc., with hypodermic injections of Pilocarpin, says: "In one of these cases, the patient, a syphilitic girl aged twenty-one, was in the fourth month of her pregnancy. After the ninth injection had been made, labor suddenly began, and the fœtus was born. Three other similar cases have already been observed. It would, therefore, be highly instructive

to submit this particular effect of the drug to careful study, as it may prove very useful in cases where premature confinement is indicated. Great care should, however, be observed in administering subcutaneous injections of Pilocarpin to pregnant women."—*Allgem. Medicin. Central-Zeitung.*

In diseases of the kidneys Jaborandi will soon be classed among our best remedies, provided we do not stupidly adhere to the symptoms of the pathogenesis we have, but are guided by the clinical experience which is every day accumulating.

The following illustrates its power in this direction:

Acute Bright's Disease cured by Jaborandi.—A. W., aged fifty-five, single. Admitted on March 20th. Has never suffered from rheumatism, and has never had any specific disease. Has always been regular in her courses. The patient states most positively that she has been perfectly well all winter, and that her illness only began one week prior to her admission. She then noticed that being exposed to the vicissitudes of the weather, her feet and then her face began to swell. Finally, a general anasarca came on. She had, at the same time, some loss of appetite, with gastric pain and cough. When she was admitted to the hospital her whole body was greatly swollen, and she was somewhat feverish; the temperature in the mouth being 99°. The heart was beating feebly, or rather the sounds of the heart were feeble. She complained of pain and weight in the pit of her stomach, and considerable dyspnœa. She passed but little urine. There was no heart murmur to be heard, although we made a very careful examination of that organ. The tongue was clear, and the digestive disturbances not much marked.

What was the cause of the dropsy? A clue was at once afforded us by an examination of the urine, which was found to contain an enormous amount of albumen; the albumen, when precipitated, filling at least one-third of the test-tube.

The microscope taught us that the urine also contained blood-corpuscles, epithelial and hyaline casts, and a few oil drops. Most of the casts were, however, epithelial.

I at once diagnosticated the case as one of acute Bright's disease—Bright's disease complicating acute renal dropsy. All this was self-evident. Only one doubtful point remained to be cleared up. Was or was there not prior organic disease of the kidneys? This was at first hard to determine off-hand. We had to wait until the acute attack had passed away under the proper treatment. The presence of casts and blood-corpuscles in the urine seemed to answer the question in the affirmative at that time.

To-day we have the best of reasons for concluding that no disease of the kidneys pre-existed. The case has ended in perfect recovery. The abnormal constituents of the urine have almost entirely disappeared. This case has been an extraordinary one, on account of the patient's very rapid recovery.

And now you will, of course, want to know what our treatment has been—how we have brought it about that in the course of two weeks after her admission the patient is entirely recovered. The general dropsy, albumen in her urine, and

dyspnœa all gone together. I ascribe all my success in the treatment of this case to the free use of Jaborandi. Five days after the Jaborandi treatment was begun, the whole face of the case was changed. The dose I ordered was one drachm of the fluid extract of the Jaborandi thrice daily. This dose produced excessive diuresis and diaphoresis. I am convinced that in Jaborandi we possess a most valuable agent for combating the dropsical complications of Bright's disease. It should be given either in the form of infusion or the fluid extract. In cases where uræmic poisoning is a factor, and where the drug is consequently not well borne by the stomach, I have administered Jaborandi by injecting it into the bowel. Though the effects of the drug when injected were not so striking as in the present case, I yet see no reason why it should not be given by the bowel as well as by the mouth. I have also tried the drug hypodermically, but I prefer not to speak positively at present of its effects when so used. In one instance I will say that it did produce considerable irritation of the skin.

How are we treating this woman, now that the dropsy is all gone? She is taking dialyzed iron internally and hypodermically. This treatment is improving vastly her general health and nutrition.

The origin of the disease in the present case is a very common one. It was brought on by cold and exposure. In children, acute Bright's disease generally follows scarlet fever. In adults it usually comes on immediately after exposure to dampness and vicissitudes of weather.—J. M. Da Costa, M.D.

Treatment of the Albuminuria of Pregnancy by Jaborandi.—Dr. Langlet, of Rheims, publishes an elaborate account of a case of albuminuria during pregnancy, which he has treated successfully by the administration of Jaborandi. The patient, three months advanced in pregnancy, showed the ordinary symptoms of albuminuria. The action of the Jaborandi on the salivary glands became apparent on the day of administration. The patient took the drug continuously for a period of sixteen days, during which time the œdema disappeared, and the general symptoms were improved. The albumen was likewise lessened to such an extent that not the slightest trace could finally be detected, and the lying-in occurred under the most favorable circumstances. Dr. Langlet has noticed that the administration of the Jaborandi caused an increase in the urinary secretion, and this coincides with a somewhat similar observation of M. Rendu, who found that in a case of acute nephritis the drug caused polyuria. On the fifteenth day of the administration of the drug hæmaturia occurred, so as to give the urine a disagreeable odor and a bright-red color. This accident, which did not retard the recovery, is to be attributed to the excessive work imposed upon the kidney by the increased secretion leading to congestion, and the congestion to actual hæmorrhage.—"Union Médicale du Nord-Est," No. 6.

The Use of Jaborandi.—Within the past year or two Jaborandi has become a very popular and useful drug at Bellevue Hospital. In uræmia and in acute and chronic parenchymatous nephritis it has accomplished especially good results.

In uræmia it is a very effective substitute for the old hot-air bath, acting more quickly and surely. As it has been shown to increase markedly the excretion of urea, it is probably more efficient than the baths in relieving uræmic phenomena.

A patient was brought into the hospital some weeks ago, suffering from con-

vulsions and delirium. She had no œdema, but her urine was nearly solid with albumen, and contained small casts and blood. She was given a drachm of the fluid extract of Jaborandi, hypodermically, and ten minims of Magendie's solution. In fifteen minutes she was sweating profusely, and the convulsions had ceased. She was restless and wandering in mind for the next twenty-four hours, but had no other bad symptoms. A drachm of Jaborandi was given every other day subsequently, and in a week the albumen had nearly disappeared from her urine, and she felt quite well.

Cases of chronic nephritis have been treated with the drug very satisfactorily. Some who did not improve or get rid of the œdema under Digitalis or Potassium, have shown immediate improvement under Jaborandi. It is given in drachm doses every other morning, the patient being kept in bed until dinner-time, when the sweating is over. It is better not to give it at night, as the bed-clothes become saturated with perspiration, and sleep is disturbed and uncomfortable.

Jaborandi weakens the heart. It is dangerous when the pulse is poor and the system debilitated. If given to a patient in this condition with uræmia he falls into a cold perspiration, and œdema of the lungs, coma, and death follow.

Yet it has been used several times in the treatment of pulmonary œdema in doses of ten to fifteen minims every one or two hours. The autopsies have shown the usual changes.

It has been used also in pleuritic effusions, but does not seem to "sweat out" the intrathoracic liquid very much. Besides, it produces a nausea and salivation not at all pleasant.

The drug loses its effect in some cases, and the dose has to be increased. The usual variety in its action has been noted. Sometimes it causes salivation only; most frequently salivation and diaphoresis. If the dose is carefully regulated, nausea and vomiting need not be a frequent complication. The urine is, in cases of chronic Bright's disease, somewhat diminished in amount, unless renal congestion or an acute nephritis is complicating the case. Jaborandi has proved, so far, of most certain service in the chronic stages of Bright's disease, and in uræmia brought on during its initial attacks. When an acute attack is lighted up on a chronically inflamed organ, and when the system has already become weakened and anæmic, the drug may be useful, but it will also be dangerous.—"The Medical Record," Nov. 9th, 1878.

Jaborandi in Obstinate Hiccough.—Dr. Ortille, of Lille, relates a case of most obstinate hiccough in which he had tried a great variety of means, including electricity and hypodermic morphia injections—the hiccough even continuing during the sleep caused by this last. He then tried the Hydrochlorate of pilocarpin, on account of its action on the phrenic nerve. A hypodermic injection of two centigrams and a half was inserted with almost immediate effect, so that in a quarter of an hour the patient was bathed in a sweat, salivation was established, and the hiccough disappeared never to return.

PIPER METHYSTICUM.

In Allen's "Encyclopedia of Materia Medica" is an extensive pathogenesis of *Kava kava*, but the omission of all clinical cases and therapeutic uses detracts so much from its virtue that I propose to give some account of its general action and use in disease.

Professor Gubler submits in the "Journal de Thérapeutique," 1878, the following conclusions regarding this new remedy:

1. The Kava root (*Piper methysticum*) possesses two orders of properties; the one cephalic and inebriating, the other diuretic and blennostatic.

2. The Kava drunkenness is *sui generis*, and does not resemble that of alcohol. Besides, the maceration called *Ava* is not submitted to alcoholic fermentation, and the preliminary mastication of the root, producing glucose, has no other result than that of giving to the aromatic liquor a sweetish and sugary taste.

3. Among the symptoms that may be denominated acute *avaism*, the most remarkable and one of the most important consists of a genesiac excitation which has its seat, not in the sexual organs, but in the nervous centres in which the reproductive instinct is vested. There is no priapism, but much erotism.

4. Besides, Kava has the power of moderating the inflammatory condition of the genito-urinary organs, and of reducing or suppressing *muco-purulent catarrh of the urethro-vesical mucous membrane*, probably through an action at once diuretic and *blennostatic*.

5. The direct and topical anti-catarrhal action is due to an oleo-resinous, balsamic substance, comparable to the terebinthinates in general use.

6. The indirect diuretic and anti-catarrhal effects depend in part upon this oleo-resin, but especially on a neutral crystalloid called *Kawahine*, and perhaps upon an unsought alkaloid, the presence of which would account very well for the peculiar drunkenness, as well as for the modification of circulation and secretion in the genito-urinary apparatus.

7. This dual action upon the genito-urinary organs assigns to Kava a remarkable efficacy in *urethritis* during its most inflammatory period. It explains the success of this remedy in cases where the pure terebinthinates have failed, and makes explicable the utility of associating the peppers—notably Cubebs, whose effects are analogous to those of Kava—with the oleo-resin of Copaiba, to secure a cure in acute or intense blennorrhagias.

8. The therapeutic employment of Kava is the more to be commended, as this aromatic remedy is not at all unpleasant, and its use gives rise to no digestive troubles.

Dr. W. N. Griswold, of San Francisco, who has used it largely, gives the following case, illustrating its power in certain diseases:

CASE I. *Neuralgia.*—Miss M. M., aged eighteen; medium size, dark-brown hair, blue eyes; health good, except as follows: Has suffered for six or eight

months with a *burning pain*, covering the surface of half a dollar, *changing about* in a circular space of four inches in diameter; centre of the *circle* about the centre of the sternum; constipation; bloated abdomen after noon and evening repast, disappearing in four or five hours; skin of the face florid, but inclined to scaly roughness.

Pain in the breast worse by eating apples, by sitting still. Relieved five or ten minutes *after* commencing and finishing eating. Often took food to relieve the pain; relieved by lying on the back; pain would disappear as soon as she lay down *on the back*.

Relieved by *diversion of the mind by some new topic*, by excitement (of Sunday-school and church exercises), by changing position; often could not sit five minutes in one place.

Several indicated remedies were used without success. I then directed fifteen drops of Piper methysticum to be placed in half a goblet of water, and two teaspoonfuls to be taken every two hours. The pain, constipation, bloating, and roughness of the face disappeared in five or six days. After ceasing the use of the drug for a week the pain partially returned. Repeated the prescription and the whole annoying group of symptoms again disappeared not to *return*.

The characteristic referred to in my proving should be noted (*i. e.*, better by diversion of the mind to some new topic); also, the *relation* of the other conditions of amelioration, viz., "change of position" and "excitement" to this mental characteristic. Other cases forthcoming will show that *amelioration* by *change* is a strong indication for the use of this remarkable drug.

CASE II.—Was called, June 16th, 1876, about midnight, to visit a man who was about thirty-five years of age; active habits, sandy-haired, and light complexion. He was suffering from orchitis, dependent on suppressed gonorrhœa. Found him writhing and twisting in bed and out of bed, seeking relief in every posture, but finding none; irresistibly impelled to move, though gaining no perceptible relief. He had been treated for twenty-four hours by an allopath, with no permanent relief. Supposing the narcotic treatment had been plied vigorously, it puzzled me to know what to do. A case of colic, with similar twisting, writhing, and moving about, had been related to me by Dr. Hiller as having been relieved by Piper methysticum. The case came to my mind. At once I put one-half drachm in one-half glass of water, and caused him to drink one-fourth of the solution; in ten minutes gave him two teaspoonfuls; began to get better. Two or three more doses and the relief was complete. Other remedies were employed to cure the orchitis, as Acon., Clem., Merc. iod., etc.

CASE III.—W. G. W., merchant; age, fifty; medium size, full figure, gray eyes and hair. Called, September 18th, 1877, at 12.30 P.M. Complained of an aching, grinding pain in the left side of abdomen, half way between the floating ribs and ilium; direction, forward and downward; eructations, nausea, and vomiting of matters without a describable taste; bowels somewhat bloated and constipated; pain not relieved nor increased by pressure; change of position continued; walked about bent forward; lay down on his back, rolled from side to side; got on hands and knees, and swayed forward and backward; the sweat poured from him all over; relief from these changes but slight, though *irresistibly* impelled to make them. The agony of this man was so great I felt inclined for temporary relief to inject Morphia; but I bethought me of the case of orchitis, and deter-

mined to try Piper methysticum. Put two drachms of the first potency in four ounces of water; gave two spoonfuls; patient continued still to perform his agonizing gyrations. A few moments later, repeated the dose; shortly after second dose, he became more quiet, and suddenly exclaimed, "Thank God, I believe I feel better." The third dose was given, and within half an hour he left, feeling entirely relieved, the pain having gradually disappeared. The pain evidently involved the left kidney and ureter. I found, several days later, that *then* he was passing sandy particles. It occurred to me that, at the time he was relieved by Piper, a stone of some size might have been passing, and its ultimate discharge might have occurred at the time he was at my office; and yet, though that contingency should be considered, I shall not soon forget the prompt relief afforded by Piper methysticum.

CASE IV.—Called, September 10th, 1877, to see Mrs. B. Two or three weeks previously menses had been suppressed. A lame feeling in right arm, half way between elbow and shoulder, succeeded. This gradually changed to numbness, with a decided dull pain in the same locality. It increased in intensity (three or four days before) until September 9th. It was described as a sharp, aching pain, like jumping toothache, or as successive gusts of sharp wind blowing on an exposed nerve. September 10th, A.M., screaming with the pain, which had run up to the top of the shoulder and right side of the head and face. Shoulder as tender to the touch as a boil. Was called about noon. Supposing it sympathetic with torpid and congested liver, gave Pod.^{3} and Acon.^{3}. Some relief followed during the afternoon, but towards night it intensified and became worse than ever. Patient was distracted, exhausted, and horrified at the prospect of another night of anguish; was tossing about in bed, out of bed, impelled to move continually; prayed for, but received little or no relief. One-half drachm of Piper methysticum, in two-thirds goblet of water; drank one-fourth of the solution. Relief followed in a few moments, and patient slept well all night. It was continued the next day, and followed by Podoph. I saw no more of the case, but learned that a dull pain and numbness, even paralysis of the arm, continued, but gradually decreased for weeks. The arm gained its power only when the menses reappeared, some six weeks subsequently.

Piper methysticum will be efficient to relieve *agonizing pain*, with *tossing, twisting, and writhing;* patient *driven irresistibly to change position*, from which change, generally, little or no relief.

C. C. Switzer, M.D. (allopath), of Macomb, Ohio, gives his experience with Kava-kava in gonorrhœa. He writes to "New Preparations:"

"I will endeavor to comply with your request, and report you my experience with Kava-kava for gleet or chronic gonorrhœa. I will give you the result of my worst case, which was surely a severe test. It was of eighteen months' standing, and had successfully resisted all treatment that had been brought to bear upon it with Copaiba, Cubebs, Cantharides, Chlorate of potash, Iron, Ergot, and injections without number, a good quantity of which I had ordered myself. I had about given it up in despair when I concluded to send an order for a half pound of Fluid extract kava-kava, and give it a trial. The result was most glorious, for

after using about two ounces in forty-drop doses, in a gobletful of water, twice daily, the patient declared himself sound and well, and which has certainly proved to be the case, for he has not felt a symptom of the return of the disease for the last six months, and the organs have full venereal power. He was also relieved at the same time of a troublesome cough that had existed for several years, which led me to think it was a superior tonic for the mucous membranes generally, and to the subsequent use of it in several cases of leucorrhœa, and always with success. I have always used it alone and uncombined with any other drug, so the result must be credited to Kava-kava alone.

PODOPHYLLUM PELTATUM.

Of all our indigenous remedies the Mandrake has, perhaps, the greatest popularity, even with allopathic physicians. With the people, and the other so-called systems, namely, the eclectics and botanics, its use can be traced back to the early history of this country.

A variety termed Podophyllum montanum by Rafinesque grows in the South.

Mandrake grows throughout the United States in low, shady situations, flowering in May and June, maturing its fruit in September and October.

The *root* is the officinal portion. The proper time for collecting it is in the latter part of October, or early part of November, soon after the ripening of the fruit.

The *fruit* possesses slightly laxative and diuretic properties, the rind and the seeds being the medicinal portions.

The *leaves* are deemed poisonous, probably possessing the same properties as the root.

Podophyllin is the resin obtained from Mandrake, and is very extensively used instead of the crude root. Dr. King, the eclectic, claims to have discovered and introduced this preparation to the notice of the medical profession. It is a yellowish or yellow-brown powder, soluble in water, Oil of Turpentine, diluted Nitric acid, and diluted alkalies. It is said to be composed of two resins, both of which are purgative; one is soluble in Alcohol only, the other in Alcohol and Ether. It has no alkaline or acid reaction, but forms a saponaceous compound with the alkalies. It has a bitter, nauseous, and acrid taste. From four to eight grains act as an emeto-cathartic, with griping, nausea, prostration, and watery

stools. From two to four grains as a drastic cathartic, with nausea and griping; even one-half a grain often acts as an active cathartic.

Medical History.—According to Rafinesque, the Cherokee Indians made great use of this plant. It was probably in use among all the Indian tribes and by them introduced to the early white settlers. The aborigines used the root to expel worms. "The Cherokees," says Rafinesque, "use it as a vermifuge; also drop the fresh juice of the root into the ear as a cure for deafness. The Osage Indians consider it as a cure for poisons, by driving them through the bowels. All the tribes are fond of the fruit." The history of the medical use of this plant is mainly confined to the early botanic and later eclectic physicians. A few allopathists, like Barton, Tully, Zollicoffer, and others, used it considerably, but it never has been a favorite drug with that school. In the hands of incautious or ignorant physicians, the Podophyllum and its active principle have been productive of an immense amount of injury to the people of the West. I have treated many painful, severe, and incurable diseases of the stomach and intestines, uterus, and urinary organs, which could be dated distinctly to overdosing with this potent drug. Next to Mercury, it is capable of inflicting more injury to the human organism, when abused, than almost any other drug in common use; yet eclectics denounce Mercury in all its forms, while pouring this poison down their patients.

The original proving was made by Dr. Williamson, of Philadelphia, and published in the "Transactions of the American Institute of Homœopathy," vol. i. I shall make that the basis of this article, and add thereto the pathogenetic and clinical symptoms which have been collected since that publication.

It has been used more extensively, perhaps, than any of the new remedies, and is already looked upon by our school as a valuable polychrest. Eclectic physicians, and of late many of the allopathic school, have come to look upon the Mandrake as a kind of panacea for nearly all acute diseases, and useful in almost all chronic affections. With its enthusiastic admirers it ranks with Calomel. Medical adjectives have been exhausted in describing its powers and virtues. It is said to be cathartic, emetic, alterative, anthelmintic, hydragogue, sialagogue, deobstruent, febrifuge, anti-peri-

odic, diuretic, etc. It is a fact that like Mercury it penetrates every nook and cranny of the organism, and there is scarce an organ or tissue of the body but feels its malign influence when it is introduced into the system in toxical doses. It has been used in nearly every disease in the nomenclature, and it is said to have proved curative in those of the most opposite character. I shall try to show in my clinical remarks the real sphere of action of this medicine, and shall not only give my own opinions, but those of the best observers of all schools of medicine.

Nervous System.—Podophyllum does not act specifically upon the nerves as does Aconite or Nux vomica. In this respect it ranks with Bryonia, Aloes, and other medicines of the same class. The pains induced by the Mandrake are probably *myalgic* in their character. In idiopathic neuralgia, or, indeed, neuralgia in any form, it is of doubtful utility.

Muscular System.—We have not sufficient proof, nor do we find anything in the pathogenesis which would lead us to suppose that Podophyllum acted directly upon the muscular fibre, as does Bryonia, Cimicifuga, or Helonias. To fully understand the action of Mandrake and other similarly acting and depressing drugs, one should read that instructive book, "Inman on Myalgia." I would suggest that Podophyllum causes pains, cramps, and other sensations and affections of muscular tissue by (*a*) its irritating action upon mucous membranes and (*b*) by a depressing action upon the vital power. According to Inman, all drastic purgatives may cause myalgia, and even cramps and wasting of muscle. Viewing the action of this medicine as I do, I cannot consider it indicated in rheumatism affecting muscles or tendons. If it has been found beneficial in that disease, it has been from some indirect action and not from any specific effect. I have known it to cause severe myalgic pains and soreness, and have found it curative in similar conditions, but never in true rheumatism. The Podophyllin has the power to cause other pains besides those referred to the bowels, stomach, and other portions of the digestive tract. I have known it to cause pain in various parts of the system, but I believe them to be generally myalgic. Dr. Coe, whose testimony is sometimes valuable, says:

Podophyllin is sometimes very tardy in its operation, not acting under eighteen or twenty hours, and frequently it will operate more freely during the second twenty-four hours than during the first. In cases of chronic disorders of the liver, at others in the spleen, and other viscera, considerable pain will frequently be experienced in the diseased organs during the operation of the medicine. Sometimes the pain will be in the liver, and at others in the spleen, again in the kidneys (medical aggravation), also in the back of the neck and head, in the pleurs, intercostal muscles, etc. (myalgia); but these symptoms will subside with the operation of the medicine.

He thinks those are favorable indications, showing that the remedy is at work arousing the dormant energies of the system. It is not necessary, however, to cause these pains.

Mucous Tissues.—In its action on mucous membrane it ranks with Mercurius, Iris versicolor, Veratrum album, and other drastic cathartics. It is powerfully irritant to this tissue, especially those of the digestive tract. It is not directly specific in its action upon the mucous membrane of the respiratory and urinary passages. It will, however, irritate and inflame any mucous surface when brought in contact with it, sometimes acting as a powerful escharotic. Of its power to cause inflammation of any and all portions of the mucous membrane, from the mouth to the anus, there can be no doubt. Such effects have been too often observed in practice, by all physicians who have had an opportunity to notice its action when administered in material doses. It even causes ulceration of this tissue, and may be said to act, as Dr. Freligh asserts of Mercury, "as a solvent of the living solids," but not to the extent of the former poison. Podophyllum is homœopathic to enteritis, gastritis, etc., and even to bronchitis and urethritis under certain circumstances, which will be noticed under appropriate headings.

Serous Tissues.—It is said to affect, by its "alterative action," the serous membranes of the body, and prove curative in pleuritis, peritonitis, synovitis, and even meningitis; but its action in this direction is not, in my opinion, specific or direct, as is the case with Bryonia.

Glandular System.—It is here that Podophyllum is a close analogue of Mercury, Iodine, Iris versicolor, etc. When taken up into the circulation it is eliminated by the glands, and is thus rendered capable of causing irritation, inflammation, and even

suppuration of almost any glandular organ or structure; but it cannot be termed a "glandular remedy" in the same sense that we estimate Iodine, Baryta, and Phytolacca. The glands principally affected by Podophyllum are the *liver*, *salivary* and *gastric glands*, and perhaps the *ovaries*. The mammary, lymphatic, thyroid, and mesenteric do not appear to be under its direct influence.

Fever.—By referring to the "Symptomatology" vol. i, you will see that a large number of febrile symptoms are arranged under that head, but the compilers of the original pathogenesis did not designate the purely pathogenetic, or separate them from the curative.

Dr. Williamson observes that Podophyllum is indicated in quotidian, *tertian*, and quartan agues, and for "periodical diseases" generally. The practitioner, however, must not expect too much of this remedy in intermittents. It cannot be ranked with Nux vomica, China, Quinia, Cornus cedron, or any of the "anti-periodic" group of medicines which act curatively by virtue of that power, but rather with Mercurius, Leptandra, Iris versicolor, etc., which act as curative agents in *intermittent fevers* by another power, namely, of correcting the condition of particular organs, as the *liver*, and thus removing the obstacles to a recovery. In my practice, which was at one time extensive in a district cursed with ague, I had ample opportunity to observe the action of Podophyllum in this disease. I never found it of benefit unless the hepatic, intestinal, and gastric symptoms corresponded with those of the drug; when given for the symptoms of the fever alone, enumerated above, it was not curative. In fact it would remove all the other symptoms, and the paroxysms of fever would still occur in a modified form. But if alternated with Ipecac., China, Quinia, Cornus, or Nux vomica (in quotidian), Arsenicum, Cedron, or Nat. mur. (in tertian), the cure would be prompt and permanent. Those who are opposed to alternation of remedies can use the Podophyllum first and *the* remedy afterwards. As the testimony of eclectic physicians may be interesting on this point, I will quote:

In bilious fevers, either remittent or intermittent, it not unfrequently arrests

the disease, at the first prescription, if given in the proper manner, or it so far modifies the attack that the case becomes mild and manageable.—KING.

Morrow makes the same statement, but says it is only indicated when there is evident hepatic torpor or congestion:

During the early stages of most febrile diseases, particularly *intermittent* and bilious remittent fevers, Podophyllin is an agent of superior efficacy. A single dose often arrests the severest attacks of fever.—JONES and SCUDDER.

In the treatment of fever and ague, we almost invariably precede the employment of the other remedies by the free exhibition of Podophyllin. By so doing, in this climate, we cut the disease short at once, and oftentimes have no occasion for further medication. We have known many cases of intermittent fever yield to a single dose of the Podophyllin, and we have no doubt but the credit of the cure is frequently due to this agent where it is attributed to other means.—DR. COE.

The above embodies the general estimate of the eclectic school as regards the value of this medicine in agues. No writer pretends that it has any actual anti-periodic power. It has been noticed in many of our provings that certain *febrile* and even *painful* symptoms were decidedly aggravated, or had a tendency to recur at certain hours in the day, or alternate days. This peculiarity renders a drug an "anti-periodic." In the proving of Podophyllum we find that certain febrile and other symptoms tend to occur in the *morning*, but this I consider rather an indication of its *remittent* action. Future experiments will decide.

In *bilious fever* this medicine is an excellent homœopathic remedy. No other drug so often corresponds with the symptoms, particularly when there is much intestinal irritation. It is admirably indicated in the various forms of *remittent fever*, which in the West are considered "bilious" in character. The *febrile* symptoms are quite strongly marked, and may afford some data for the selection of this drug, but we should be guided principally by the general symptoms. As above stated, eclectic physicians, and of late many allopathic, are enthusiastic believers in the power of Podophyllum, when given at the outset of nearly all fevers, in cathartic doses, of arresting or "breaking up" such attacks. But I need not acquaint the homœopathic physician that such practice is sometimes fraught with the most deplorable consequences. When the patient is strong and robust, the vitality of the organism may rally from its depressing action or medicinal aggravation

of the malady; but if such reaction does not take place, the fever, which may have been mild in its character, is changed to a serious and intractable one. The intestinal irritation which the Podophyllin sets up will go on and withstand all the rude means of the eclectic to arrest it. In this way I have known simple remittents changed into enteric or typhoid fever. In *irritative fever* and *infantile remittent* no remedy will give better satisfaction, not even Mercurius. But it should be used with caution in all fevers accompanied or caused by intestinal or gastric irritation. In these cases it is primarily homœopathic, and should be used in the fourth and sixth dec. dil.; but should symptoms denote inactivity of the liver and glandular system of the intestines, and constipation with jaundice exist, then the second or third dec. trit. may be used safely.

In *typhoid* and *typhus fevers* (enteric) the Podophyllum is often indicated. It is quite as homœopathic to the irritation, inflammation, and even ulceration of Peyer's glands as Mercurius and Arsenicum; but it is not so well indicated by the general symptoms, namely, the condition of the blood, etc., as Baptisia, Phosphoric and Muriatic acids, or even Leptandra, or Iris. Dr. Hill ("Epitome") says Podophyllin is the *best* remedy for the diarrhœa of typhoids. But homœopathists can accept no such wholesale assertion. If the diarrhœa, in a case of typhoid, corresponds to the Podophyllum diarrhœa, then, and only then, is it a specific remedy. The best writers in the eclectic school are aware of the danger of giving large doses of Podophyllin in typhoid and other low fevers, and *all* are particular to warn the physician not to use it when there is much prostration or intestinal irritation existing. Notwithstanding this the physicians of that and the old school are generally so ignorant of disease, and so reckless of consequences, as to give this powerful drug in typhoid fever. The consequences are that few patients under that treatment have vitality to resist the toxical effects of the drug and the disease. If Podophyllin is prescribed in true enteric (or typhoid fever) it should be only the middle and higher potencies—the tenth and upwards. The Podophyllum may be used lower—in the third or sixth. These general remarks I deem sufficient to point out the applicability of the remedy in the various forms of fever. They

will serve to guide the practitioner in the selection of the drug by the special symptoms. Even the *exanthematous fevers* form no exception.

The action of Podophyllum on the *skin* has never been fully investigated. Although eclectics claim to cure some chronic eruptive diseases with it, I doubt if it has any specific action on that tissue. The provings do not show any irritation of the skin, nor have I ever observed any skin symptoms arise from its internal use. The topical application will cause redness, vesication, and pustulation, but I do not consider this effect as specific.

The *gastro-intestinal* and *hepatic* symptoms and pathological conditions caused by Podophyllum are of more importance to us than any other. Its effects on all these tissues is the foundation and origin of nearly all the symptoms belonging to the drug.

Beginning with the buccal cavity we find the following symptom:

Copious salivation; * offensive odor from the mouth; * offensiveness of the breath at night, perceptible to the patient; taste of fried liver in his mouth at night; sourness of the mouth and tongue on waking in the morning; white fur on the tongue with foul taste; putrid taste in the mouth.

Dr. Williamson contributes the curative symptoms marked with a star. The effect of the Podophyllum upon the mouth is quite specific and noteworthy. All writers agree that it will cause symptoms like salivation. I have known it to cause severe ptyalism in numerous cases when abused by eclectic physicians. Even in the 3d trit. this effect is quite noticeable in persons who are subject to stomatitis or have been mercurialized. Dr. Coe says:

> It has been said that Podophyllin is capable of producing ptyalism, but we have never seen any evidence of the fact in persons who had *never taken Mercury*. The only symptoms of salivation we have ever observed have been in those cases where Mercury has been taken at some previous time. Podophyllin is powerfully resolvent, and by its peculiar excitation of the glandular system will sometimes dislodge deposits of latent mercurial atoms, and so bring about a season of mercurialization. Lobelia, Irisin, and Phytolaccin will frequently do the same.

This is a species of special pleading often resorted to by eclectic practitioners, but it is untenable. If these drugs will cause pytalism when Mercury is in the glands, it will cause the same symptoms

when Mercury is not present. The only difference will be that the presence of Mercury renders the glands more susceptible to the action of these agents. Podophyllin is homœopathic to ptyalism, even mercurial; to stomatitis, and many inflammatory affections of the gums and buccal mucous membrane. It has been found curative in "nursing sore mouth," "canker in the mouth." I have cured with the dilutions, used as a wash, a case of chronic inflammation of the tongue, which was red, dry, cracked, and often bleeding, and somewhat swollen. It seemed idiopathic, as no gastric derangement was noticeable.

The *throat* symptoms imply a greater degree of inflammation, namely:

Sore throat, commencing on the right side and then going to the left; soreness of the left side of the throat, especially painful when swallowing liquids, and worse in the morning; *dryness of the throat;* soreness of the throat extending to the ears; * rattling of mucus in the throat; **goitre*; * sore throat, commencing on the right side and going to the left.

The three curative symptoms are contributed by Dr. Williamson. The first is due to the irritant action of the Mandrake upon the tonsils and mucous follicles of the throat. This medicine has made undoubted cures of goitre in the hands of homœopathic as well as eclectic physicians. The testimony on this point seems conclusive, but I cannot say that I have ever seen much benefit from its use in my hands, at least no such decided effects as follow the use of Iodine, Bromine, and their salts, even in minute doses. Nor have I found it of much value in tonsillitis, in which it is inferior to Phytolacca or Baryta carbonica.

The effects of Podophyllum on the *stomach* and *bowels* are now quite well understood.

By referring to the symptomatology of this remedy, you will see that I have attempted to arrange the symptoms into primary and secondary. They begin with a lax state of the bowels; then follows soft mushy diarrhœa, then watery and slimy, and finally mucous and bloody, with tenesmus. After these primary conditions we get the secondary, namely, constipation, piles, prolapsus recti, etc.

With the primary symptoms we get a great many concomitant

or reflex symptoms, which can only be learned by a careful study of the pathogenesis.

One instance will suffice, namely, the reflex brain-symptoms, which occur during the primary intestinal irritation. In adults we find headache, vertigo, and confusion of mind. In children, owing to the sensitive condition of the brain, we get actual cerebral irritation, manifested by *rolling of the head* and *grinding of the teeth*, with *moaning*. The head is not primarily affected, but cases of actual cerebral irritation have been cured by Podophyllin in the middle and higher attenuations.

I quote Dr. S. Ringer's observations on this drug. (See Ringer's "Therapeutics.")

The action of Podophyllum on the gastro-intestinal and hepatic system has been thoroughly investigated by Dr. Anstie, who has studied the action of Podophyllin on dogs and cats, and has found that in from two to ten hours after the injection of an alcoholic solution into the peritoneal cavity, and after the effects of the Alcohol had ceased, Podophyllin excited vomiting and almost incessant diarrhœa.

Dr. Anstie does not usually describe the character of the stools; but in one experiment he states that they consisted of glairy mucus, and in two other experiments the stools were highly colored with what looked like bile. In many of the experiments the stools contained blood. The animals suffered great pain, and soon became exhausted.

At the post-mortem examination the œsophagus was healthy, but the stomach somewhat congested—induced, as Dr. Anstie suggests, by the violent efforts of vomiting. The small intestines, especially at the lower part of the duodenum, were intensely congested, and in some instances the lower part of the duodenum was extensively ulcerated. The large intestines were but slightly inflamed. Although the injections were poured into the abdominal cavity, the peritoneum itself was not at all inflamed, not even around the unabsorbed granules of Podophyllin. The contents of the intestines were liquid. In all the instances in which the effect of the medicine on the heart and respiration is mentioned, respiration ceased before the heart stopped.

From these experiments it was evident that Podophyllin has an especial affinity for the small intestines, and chiefly for the duodenum.

The results of these experiments, and the fact that Podophyllin produced no apparent change in the liver, led Dr. Anstie to conclude that it is not a cholagogue. The Edinburgh committee carefully investigated the action of Podophyllin on healthy dogs. The reporter, Dr. Hughes Bennett, states that doses of Podophyllin, varying from two to eight grains, diminished the solid constituents of the bile, whether they produced purgation or not, and that doses which produced purgation lessened both the fluid and solid constituents of the bile.

But assuming that Podophyllin is incapable of increasing the secretion of bile in health, it by no means follows that in this respect it is inoperative in disease.

It is quite conceivable that Podophyllin and other remedies may remove certain morbid conditions of the liver which arrested the secretion of bile, and so act indirectly but efficaciously as cholagogues; and surely it is far better to promote the secretion of the bile by restoring the liver to health, than to give a drug (if such exist) to compel a diseased liver to secrete. In the one case we remove the hindrance to the secretion of the bile; in the other, if it is possible, we compel the secretion in spite of this obstacle.

The experience of those who have largely used this drug is strongly in favor of its possessing cholagogue properties; and the author's experience leads him to a like conclusion.

For instance, its effects are very marked on the motions of children, with the following symptoms: During the early months of life, and especially after a previous attack of diarrhœa, obstinate constipation may occur, with very hard motions, crumbling when broken, and of a clay color, often mottled with green. Sometimes the passage of the hard stools through the sphincter of the rectum occasions great pain, causing the child to scream at each evacuation. At the same time there may be much flatulent distension of the belly, which excites frequent colic; this, in its turn, making the child cry, often without cessation. The morbid condition of the motions is frequently observed in children of one or two months old, who are fed instead of suckled. The author knows nothing so effectual in bringing back the proper consistence and yellow color to the motions as Podophyllin. A grain of the resin should be dissolved in a drachm of Alcohol, and of this solution one or two drops are given to the child on a lump of sugar, twice or three times in the day. The quantity administered must be regulated by the obstinacy of the bowels, which should be kept open once or twice a day. Under this treatment the motions often become natural, the flatulent distension of the belly gives way, and the child quickly improves. The restoration of the color to the motions is probably owing to the increased secretion of bile by the action of the Podophyllin.

That disagreeable cankery taste, unconnected with excess in alcoholic drinks, generally occurring only in the morning, but sometimes continuing in a less degree all day, gives way usually to Podophyllin; and if it fail Mercury generally answers. It is true that this symptom, when due to constipation, is removable by many purgatives, but Podophyllin and Mercury answer best.

Small doses of Podophyllin are highly useful in some forms of chronic diarrhœa. Thus, a diarrhœa with highly colored motions, with cutting pains, is generally relieved by small doses of Podophyllin, the bowels becoming regular, and the pain speedily subsiding. This medicine is especially indicated if this form of diarrhœa occurs in the early morning, compelling the patient to leave his bed several times, but improving after breakfast or by the middle of the day; or sometimes diarrhœa does not occur after breakfast, but returns early next morning. Indeed, Podophyllin will generally cure this morning diarrhœa, even if the motions are pale and watery. By means of Podophyllin the author has cured chronic diarrhœa of watery, pale, frothy motions, with severe cutting pain, even when the diarrhœa has lasted for many years. Two or three minims of a solution containing a grain of Podophyllin, in two drachms of rectified spirit, should be given three or four times a day.

Podophyllin is very useful in some forms of sick headache. The nature and the order of the symptoms differ greatly in different cases of sick headache. Some, for instance, are accompanied by constipation, others by diarrhœa, and in each of these kinds the stools may be either too light or too dark in color. There are, besides, many other varieties of sick headache. Where the headache is preceded, accompanied, or followed by a dark-colored, bilious diarrhœa, Podophyllin generally does good. Two or three minim doses of the solution just mentioned, given three times a day, will restrain the diarrhœa, lighten the color of the motions, and, if the medicine is persevered with, either prevent the attacks or considerably prolong the intervals. When the diarrhœa is of a light color, and the motions evidently contain too little bile, it is considerably benefited by a hundredth part of a grain of Bichloride of mercury, given three times a day. Again, when the headache is accompanied by constipation and the motions are of a dark bilious character, a free Podophyllin purge every day, or alternate day, is very useful. Even in those nervous headaches occurring either just before, at, or directly after the menstrual period, if associated with constipation and dark-colored stools, purgative doses of Podophyllin often give relief.

I know that it is now generally held, and on conclusive evidence, that in sick headaches, or, as they are often termed, nervous headaches, migraine, hemicrania, the origin of mischief is situated in some part of the central nervous system, and it is asked, therefore: Of what use is it to give medicine to act on the stomach, liver, or intestines?

It is further urged, that when sickness, diarrhœa, or constipation accompany or follow the headache, they are the result and not the cause of the attack. Granted that the central nervous system is the seat of the complaint, yet it is excited in various ways in various people, one cause producing an attack in one person, but failing to excite one in others. Thus a single or several articles of diet will with some surely bring on an attack. In some persons the fit is preceded by diarrhœa, bilious or pale; in others, by constipation; again, in others, it is clearly traceable to uterine derangement. It is true that even in any of these cases certain circumstances, common to all, will precipitate an attack—as fatigue, overexcitement, or nervous exhaustion. Yet these patients, in many of their attacks, experience, almost unfailingly, warning by symptoms due sometimes to the stomach, or the bowels, or the womb. It appears, therefore, to me that the treatment of this disease must be of three kinds. One treatment should be directed to the removal of the affection of the nervous system; another, by the prevention of the exciting cause; and lastly, a third treatment to the subdual of an attack, as, for instance, by means of applications to the seat of pain, and also, as I believe, by means of medicines which act on the stomach, liver, intestines, or womb.

Experience certainly leads me to hold firmly that the foregoing directions, with respect to treatment, are correct; that where the attacks are preceded by hepatic or intestinal disturbances, Podophyllin or Mercury are very useful agents; nay, I am inclined to believe that they are serviceable even when the symptoms only accompany the pain, and are probably the result, and not the cause, of the attack. Although it may be urged that it is folly to treat the effects in order to remove the cause, still, as we have seen in the section treating of counter-irritants, that local applications to the seat of pain appear to control the central nervous

disease, there is no reason why the remedies which affect the terminations of the other affected nerve, namely, the vagus, should not also be able to modify the central affection.

Some American physicians go so far as to say that this drug fulfils all the indications of Mercury. In America it is called vegetable Mercury.

The injection of Podophyllin under the skin has been recommended. It is readily soluble in equal parts of Liquor potassæ and water; and if the drug is pure this solution is not precipitated by the addition of water. The injection of this solution to the extent of one-tenth to one-third of a grain quickly purges—sooner, it is said, than when given by the stomach—and causes no pain.

Podophyllin is a rather uncertain purgative. The pure drug causes very little griping. In too large doses it is very apt to produce slimy and bloody stools, particularly in children.

Dr. Anstie's estimate of the curative powers of Podophyllin does not differ greatly from those of an eminent English homœopathist, Dr. John Moore, of Liverpool, whose observations I shall quote. I think Dr. Moore is a little too sanguine as to the permanent good results from material doses of the drug, but as he is undoubtedly judicious and cautious in its administration, no bad results may attend its use in his hands. In the practice of less careful and observant physicians its free use in all cases might be followed by secondary symptoms of an unpleasant character.

Dr. Moore has doubtless hit the chief pathological keynote of the *hepatic* action of this powerful drug. He says:

Lactic acid is an effectual antidote to its effects. Fifteen grains have been given, and immediately afterwards a draught of sour milk, and the effect of it has been *nil*. Sugar antidotes it somewhat; salt increases its action; Acetic acid does not affect it.

In *gout* it is useful after acute symptoms have subsided; or in cases where the attack is preceded by premonitory symptoms it is indicated at once. It will ward off an impending attack of gout. It had good effects in jaundice when it had returned again and again, after China and Mercurius. The following inferences are drawn from the facts related:

First. That it is a very active and penetrating medicine, resembling Calomel in its specific action on the liver and glandular system, but beyond that the similarity ceases.

Second. That its direct sphere of action is on the entire portal system, and indirectly all other systems connected with that, either by nervous or vascular ties.

Third. That while the liver and gall-bladder are directly acted upon by this medicine specifically, and led by it to discharge their contents, great relief is given to the lungs and the brain when oppression of these vital organs is connected with inactive and irregular action of the liver.

Fourth. That torpidity of liver, rather than vascular, is the chief sphere of it; in other words, a non-secretory state, or a state of non-expulsion of the secretion of bile, is the indication for it, and this state is indicated by sallow complexion, furred tongue, and constipation.

Fifth. That the curative dose in such cases must be brought near to the physiological, viz., the 10th, 5th, or 4th of a grain, given once, or at the utmost twice, a day, and immediately arrested if diarrhœa appears.

Sixth. That the middle dilutions ought to be prescribed for the other diseases in which it is indicated,—diarrhœa, dysentery, prolapsus ani or uteri, etc.

Seventh. That the diseases in which it has been found most serviceable by the writer are gout, erysipelas, spasmodic and bronchial asthma, and chronic bronchitis, and in all these diseases only as an intercurrent. (The writer has not had any personal experience of its benefit in syphilis and goitre, and cannot, therefore, affirm or deny its power in these diseases.)

Eighth. That it is not specially indicated in hepatitis, nor in any of the early stages of acute diseases, save in the diarrhœa and dysentery, for which it is homœopathic.

Ninth. That it ought never to be given where a simple aperient is required, as in cases of indigested food, lodgment in the cæcum, and colon, etc. Its use should be restricted to liver constipation.

Lastly. While a specific has been defined by Dr. Drysdale, as a remedy in which the whole physiological is absorbed into its therapeutical action, there are some exceptions, and this I believe to be one of those where the boundary line between the physiological and therapeutic action is not easily defined, and where we are most certain of the therapeutic effects when we touch the physiological sphere.

The symptoms recorded as belonging to the liver are not as well defined as they should be. It is difficult to decide whether all the pains are myalgic or really in the organs referred to in the headings. Some of the symptoms are undoubtedly myalgic. The curative symptoms of fulness, etc., have been so often verified by Dr. Williamson and others of our school, that we may safely say that it indicates hepatitis or congestion of the liver. The "chronic hepatitis with costiveness" is also a valuable observation. It is not necessary, however, that constipation should be present; it is as useful when that disease is attended with diarrhœa, or the two states alternately. From many years' experience with, and observation of, the use of Podophyllin in diseases of the liver, I feel qualified to venture the following observation relative to its pathogenetic and curative action upon that organ. I believe the Podophyllum and its active principle to be a direct stimulant of the liver. I am aware that some of the most astute investigators of

the allopathic school deny that Mercury has any direct or specific action on that organ. They would probably allege the same of the Mandrake, but there are certain reasons, which I shall give farther on, why I consider the arguments against Mercury not valid in the case of Podophyllum. The primary action of Podophyllum in large doses is generally to cause vomiting and diarrhœa of undoubted bilious matters. I have examined the evacuations caused by Podophyllin, in cases of *jaundice*, which before its administration were completely free from bile, and found that the green color was actually due to that secretion. The examination was made with the most approved chemical tests. The patient felt the action of the drug upon the liver before it nauseated or caused any intestinal irritation. (The dose was one-fourth of a grain of the pure resinoid, triturated with ten of Sugar of milk.) In still smaller doses, third trituration, it will cause bile to appear in the previously clay-colored stools. I consider this medicine, therefore, primarily homœopathic to acute irritation, congestion, and inflammation of the liver, bilious diarrhœa, and hepatic pains. A further proving is needed to give special indications. The powerfully irritating effect which this drug has upon the secretory functions of the liver enables it to cause such excessive action as may pass over into passive congestion, chronic inflammation, suspension of function from exhaustion, suspension of biliary secretion, and even retention of that fluid. Podophyllum has been abused in the hands of eclectics as badly as Mercury in the allopathic school. I have known it to cause chronic hepatic diseases, as jaundice, enlargement, and even some organic affections. There is scarcely an acute or chronic disease of this important viscus, in which this medicine may not, in some of its stages, be found useful. A careful study of our proving, together with the observations of physicians of both schools, will give us much information as to its sphere of action.

The dose in hepatic diseases is a matter of great importance. I believe an adherence to the following rules will give the physician greater success with the medicine than he could obtain without them: (1.) For the primary (acute) conditions, similar to those caused by large doses of Podophyllum, give the highest and middle attenuations. (The third or eighteenth of Podophyll*um*, and

sixth or thirtieth of Podophyll*in*.) (2.) For symptoms and conditions (chronic) simulating the secondary effects, give the lower attenuations, and in rare cases even the one-tenth of the resinoid. (3.) In a few cases, as in retention of the bile from obstruction of the gall-duct, or in cases of gallstones, we must have the direct mechanical effects of Podophyllum. In such cases crude doses are required. This is best illustrated by the following case of expulsion of gallstones, reported by me to the "North American Journal of Homœopathy," vol. xii, p. 258:

In vol. vii, p. 304, of this journal, my industrious colleague, Dr. Marcy, made mention of "an empirical remedy for gallstones," and says: "For the violent spasmodic pains which accompany their passage to the intestines, we have found the following treatment, derived from an empirical source, eminently efficacious: As soon as the pains have declared themselves, we give the patient six ounces of tepid Olive oil, and then prescribe Nux vomica and Aconite in alternation every half hour. We also apply hot-water fomentations, and occasionally a warm bath, when the paroxysm is not speedily ameliorated." The case which I will now report is a very interesting one. The patient was a young lady, residing in Chicago, who had been subject for several years to attacks of supposed gastralgia, which would pass off in a few days, under the use of anodynes, leaving her slightly jaundiced. This attack had been much more severe, and she had been under the care of two professors in the allopathic college in this city for six weeks when I was called. They pronounced the disease "neuralgia of the stomach." The character of the pain had not changed, only to grow more severe since its onset. She had been drugged with Blue mass, Calomel, Opium, Dover's powder, and Chloroform, and received only temporary benefit from their use. I found her emaciated, jaundiced (her skin of the hue of bronze), tongue coated white; no appetite; headache most of the time; pulse quick and hard, but small; urine very scanty, a yellowish-brown color, and was found to contain bile when the usual tests were applied. The pains in the epigastrium extended to the right side, region of the gall-bladder, and were remitting, *i. e.*, there were paroxysms of great intensity, but some pain all the time; excessive nausea, when the pain became severe; constipation and diarrhœa alternated, and in either condition the evacuations were now, and had been, destitute of bile for several weeks. At my first visit I was undecided as to the pathological condition at the bottom of the difficulty, but gave Aconite and Nux vomica. The next I decided that the malady originated from the presence of gallstones in the gall-duct, obstructing completely the passage of bile into the intestines, and giving rise to the intense pain. No relief had been obtained from the remedies, and she had been obliged to resort to Chloroform all night. I now resolved to try Dr. Marcy's treatment. Six ounces of tepid Olive oil were ordered, but she could only be induced to swallow three. This was at 3 P.M. At 9 P.M. the other three ounces were administered. Nux and Aconite were continued as before.

Third day. No improvement. She took Chloroform about half the time, to get relief from the intense spasmodic pain; urine more scanty and of a deeper

color; slimy, white diarrhœa, not a trace of bile in the discharges; vomiting of mucus; no bile had been vomited for several weeks. I ordered a hot bath. In the attempt to take it, a very severe chill set in, with fainting. This was followed by some fever. In the evening she became stupid, and would not answer questions, and I feared she would go into coma. Dr. Coe gives the following treatment for gallstones: He gives at bedtime a powder composed of Podophyllin, grs. ij.; Euphorbin, grs. j.; Caulophyllin, grs. ij. The next morning, "as soon as the nausea attending the operation of the powder has subsided, administer eight ounces of pure Olive oil." "We have known," he asserts, "as many as two hundred of these concretions, varying in size from that of a small pea to that of a hazelnut, to be passed after the administration of a single dose of Podophyllin and the oil." My patient was rapidly sinking, and I knew that if the obstruction was not soon removed, the blood would become irretrievably poisoned with bile. I did not deem it necessary to follow Coe's practice. Podophyllin is the real agent which dislodges the concretions from the duct. This it does, I believe, by increasing the expulsive power or peristaltic action, so to speak, of the gall-bladder and its duct. The Olive oil may aid in relaxing and dilating the duct, and it carries the concretions through the bowels after they have been expelled. I accordingly gave one grain of Podophyllin in the evening; she was allowed Chloroform during the night. In the morning she swallowed three ounces of Olive oil at 6 o'clock, At 9 o'clock she vomited bile; at noon she had a free evacuation from the bowels, of a bilious appearance. At 3 P.M. another bilious stool, and with it a discharge of several gallstones. They fell into the vessel with a metallic sound, as the nurse informed me. All pain ceased about the time she vomited, and did not return. The concretions were round, about the size of a cherry, rough externally, yellowish, and when broken in two showed a radiating appearance from a common centre. No account was kept of the number passed, as the nurse was somewhat negligent and failed to collect them. In a few days, under the use of Aconite and Nux vomica, the jaundice had nearly disappeared; her appetite returned, and in two weeks she was able to ride into the country, and has since enjoyed good health.

In the words of Dr. Marcy, I assert "that this affords an example where the consistent homœopathist is justified in employing a chemical and purgative agent to rid the system of foreign substances which nature is struggling to throw off. It is not disease which we are to remove, not a therapeutic agent which we are to administer." I recognize three methods of restoring health, viz., the chemical, the mechanical, and the homœopathic. By the first we can remove an irritating cause of disease, as by the use of Nitric acid in Oxalic acid urine; by the second we can expel a biliary calculus with Podophyllin and Olive oil; and by the last —the only law of cure—we remove, with Aconite and Nux, the hepatic inflammation consequent upon the passage of the stones. I maintain that my treatment was as rational and scientific as that of the surgeon who removes the spiculæ of bone or the musket-ball, and *then* uses his specific remedies, with his surgical appliances.

It is amazing to witness the vast confidence which the eclectic physicians have in Podophyllin in nearly every disease of the liver. They use it almost indiscriminately in the most opposite states and conditions, and functional organic af-

fections of that organ. I have not space to quote their observations and praises, but would refer the reader to their works on practice and Materia Medica. In *congestion of the portal circle* this medicine appears to have an immense curative power, in which it is only equalled by Mercury, Chelidonium, and Leptandra. In *diseases of the spleen* the Podophyllum has been found useful. It may be tried in acute inflammation or chronic enlargement.

In *jaundice* from a catarrhal affection of the gall-ducts, it does not equal Chelidonium or Carduus. In jaundice from failure of the hepatic cells to perform their functions, it is more suitable, but may have to be aided by Myrica, Leptandra, or Mercurius.

The primary *diarrhœa* caused by Podophyllum I have already described. Dr. Bell, in his monograph, has admirably given the characteristic indications.

There are only two forms of diarrhœa in which this medicine is secondarily indicated. I allude to that form which is accompanied by complete jaundice, and in which the evacuations are clay-colored and very offensive; and the diarrhœa which *alternates* with constipation, in some chronic hepatic disorders. In these varieties it will be found necessary to use the lower dilutions and triturations, while in the former affections the middle and the highest potencies will act curatively. Dr. Jeanes has cured many cases of relaxed bowels, when the stools were *too frequent but natural*, with the highest attenuations of this remedy.

Acute and chronic *colitis* is a disease which calls for the Podophyllum. The symptoms of the drug and disease bear a remarkable resemblance, as a comparison will show. *Dysentery* is one of the diseases in which this medicine has been found most useful. An abuse of this drug, and even its moderate and careful use, in some cases is sure to bring symptoms of acute dysentery. It is useful in chronic or acute dysentery, and in many cases will be found more beneficial in all the stages than any other agent.

One feature of the Podophyllum dysentery is the almost invariable presence of *prolapsus ani*, or a tendency thereto. I once attended two children, aged respectively three and six years, who had been dosed with Podophyllin by an eclectic. Dysentery was present in both patients, and also prolapsus recti. The mucous membrane of the rectum was red, inflamed, and exquisitely sensitive. Drs. Jeanes and Williamson noticed similar pathogenetic

effects. I cured the children with Nux and Nitric acid. Many cases of prolapsus recti have been cured with Podophyllin, even when of *six years'* standing, and accompanied all that time with diarrhœa. Dr. Gatchell gives the indications for this remedy in dysentery, "commencing with a watery diarrhœa, terminates in a muco-sanguineous dysentery, accompanied with sickness at the stomach. If the diarrhœa which preceded the dysentery especially manifested itself early in the morning, the case will be more appropriate." He advises six drops of the tincture in six ounces of water, a teaspoonful at a dose, which is to be repeated after each stool, until improvement commences. This prescription will cure many cases of dysentery. This remedy is chiefly indicated in the so-called bilious dysentery, in which the stools look like pea-soup, and consist of a yellowish, greenish, or bloody mucus, having a disagreeable odor, and accompanied with violent pains in the region of the colon, rectum, and anus. It causes and aggravates hæmorrhoids and severe tenesmus, with prolapsus ani, especially in children; sometimes nausea and vomiting go with the above symptoms. The active principle, or Podophyllin, at the third trituration is often more effectual and prompt in its action than the tincture. Altogether it is one of the best remedies we possess for the cure of dysentery, enteritis, and many other inflammatory diseases of the intestinal tract.

Cholera morbus is sometimes treated very successfully by the use of Podophyllum. It causes, in large doses, similar watery, flocculent discharges, very profuse and exhausting, accompanied with cramps in the abdominal and flexor muscles of the extremities. In this respect it is the analogue of Elaterium, Jatropha, Euphorbia cor., Arsenic, and Veratrum. *Asiatic cholera,* in some of its phases, ought to find a specific remedy in this medicine. So abundant are the alvine evacuations of serum caused by Mandrake, that eclectics use it as a *hydragogue* cathartic in cases of dropsy. In *cholera infantum* it was found by Drs. Jeanes and Williamson to be eminently useful. I have used it in a good many cases of this disorder, as well as in diarrhœa from teething, and nearly every intestinal disease to which children are subject, and have found it as useful as Mercury, Chamomilla, or Pulsatilla. In the bowel complaints of children, the practical physician is cognizant

of the colic with spasmodic retraction of the abdominal muscles, the spasmodic tenesmus, and tending to prolapsus ani; all strong indications for this medicine.

Hœmorrhoidal affections are admirably under the control of Podophyllum. The specific affinity which this drug has for the liver, portal system, and rectum, as shown in the pathogenesis, enables it to cause hæmorrhoids from portal congestion, chronic hepatic affections, and primary irritation, congestion, and even inflammation of the veins and mucous membrane of the rectum. It will be found useful in external piles, for those which bleed and those which do not. The *sensations* it causes in the rectum, anus, and hæmorrhoidal tumors are similar to the effects of *Aloes*, of which it is a congener.

Dr. Richard Hughes says:

My experience with this drug is limited to its action on the alimentary canal and its associated viscera. There is one form of that very vague affection known as "biliousness," in which it is very useful. This is characterized by sickness and giddiness, bitter taste and rising, tendency to bilious vomiting and purging, and dark urine. Podophyllin, from the first to the third trituration, has generally, in my hands, rapidly removed these symptoms. On the other hand, when biliousness means dull pain in the right hypochondrium, pale and costive motions, loss of appetite, and depression of spirits, it will resist Podophyllum, and yield pretty quickly to the third decimal trituration of Mercurius solubilis. I cannot, therefore, agree to the generalization which styles Podophyllum "the vegetable Mercury."

What is the precise nature of the physiological action of Podophyllum upon the biliary apparatus seems to be very doubtful. It is certain, however, that it exerts a specific action of an irritant nature upon the mucous membrane, especially upon that of the small intestine and the rectum. Our provings are confirmed in this particular by the experiments of Dr. Anstie on animals, recorded in the "Medical Times and Gazette," for 1862. I have found it act well in a case of chronic duodenitis. In inflammatory irritation of the jejunum and ileum, it is invaluable, for I know of no other potent drug which affects, specifically, this part of the alimentary canal. The influence of Arsenic and Kali bichromicum becomes weaker as the duodenum is passed, to be renewed in the case of the latter at the colon; with the former hardly till we reach the rectum. Mercurius corrosivus affects the large intestine only. Podophyllum might be cautiously tried in the enteric lesion of typhoid fever, with which it has at least a local affinity. The same reason which makes it so valuable in affections of the small intestine, renders it unsuitable in ordinary dysentery, which has its seat in the colon. In cases, however, where a dysenteric diarrhœa appears to depend upon inflammatory irritation of the rectum, Podophyllum will give rapid relief. Such a malady is not uncommon in children, and is accompanied with painful prolapse

of the rectum at each stool. Here I give Podophyllin at the third trituration; but in the simple prolapsus ani from debility, of infancy and childhood, I have almost invariably seen beautiful results from the tincture of Podophyllum in the twelfth dilution. In the same form, following Dr. Jeanes (see Hale, p. 346), I have given it with perfect success in cases where, in children, the stools are too large and frequent, but natural in color and consistence.

In acute or chronic mucous or follicular enteritis, it is specifically and primarily indicated. No drug, not even Mercury, so surely causes these conditions. Whether the disease be present in children or adults, the Podophyllum will be found promptly curative.

Diarrhœa, in nearly all its varied manifestations, finds a *similimum* in the pathogenesis of this potent drug.

Dr. S. M. Schell, of Chesterville, Pennsylvania, communicates the following experience with this remedy and Leptandra in *diarrhœa.*

CASE I.—A boy, three years of age; chronic diarrhœa of three months' standing (treated allopathically), without any good results. The evening and night previous to being called to see the child, he had fifteen passages, of a very disagreeable odor, and of the color and consistence of tar. Gave four drops Tincture leptandra, in two-thirds glassful of water, dessertspoonful every hour for four hours. The next stool natural. Cured in twelve hours, and well since—now one year.

CASE II.—Mr. ——, had chills, and had taken great quantities of allopathic medicines. When I saw him he was much debilitated, sallow complexion, bad nightsweats. Gave a few powders, first of Carbo veg., with some effect, and on examination again gave Leptandra 1st in powder, and the cure was rapid.

Diarrhœas occurring in the early morning only, cured with *Podophyllum* 3d, no *failures*. In one case, a boy, the stools were tarlike, but occurring in the morning. Gave Leptandra, with no effect. Then gave Podophyllum 3d; cure rapid.

Drs. Hering, Jeanes, Ringer, and many others lay much stress on the tendency to *morning aggravation* of the intestinal and, indeed, all the symptoms of Podophyllum.

I have not yet been convinced that this remedy specifically and distinctly affects the uterus, any more than does Aloes, Nux vom., or Collinsonia. I believe it affects that organ, as well as the vagina, by its action on the circulation in the pelvis.

Besides the symptoms marked as curative and pathogenetic, Drs. Williamson and Jeanes have cured the following: "*Prolapsus uteri*—many cases; numb, aching pain in the region of the left ovary, with heat running down the left thigh, in the third

month of pregnancy; ability to lie comfortably only on the stomach in the earlier months of pregnancy; *swelling of the labia* during pregnancy; after-pains, attended with flatulency. Other homœopathic practitioners have found the Podophyllum useful in many of the diseases of women, especially when involving the uterus and *ovaries*. It is still an unsolved question, in what way the medicine affects the uterus; in some cases it would seem to do so by its action on the bowels and rectum, as is the case with Aloes. It is well known that any drug which powerfully irritates the lower bowel will cause congestion and even inflammation of the womb, by extension of effect through contiguous tissues; thus Aloes may cause the above, as well as uterine cramps, menorrhagia, prolapsus, etc. It is thought by some that Podophyllum has a similar action, but it would seem from our proving, as well as numerous clinical cases reported, that the medicine must have some direct action on the uterus and ovaries.

Prolapsus Uteri et Vagina.—CASE I.—A lady who had lately given birth to a stillborn child, of large size, with a serious loss of blood, and had undoubtedly the symptoms of a severe prolapsus of the womb. Arnica was given a few days, followed by China and Carbo veg.; these greatly increased the strength of the patient, after which I gave Mercurius 3d, four powders, and Podophyllin 3d, four powders, on alternate days. In four or five days she was completely cured.

CASE II.—A lady had been confined about four weeks previously, but had been suffering ever since with violent bearing-down pains in the region of the womb; intolerable pain in the back; great degree of weakness; aphthæ, and several scrofulous swellings about the neck. On examination, I found a moderate degree of prolapsus, swelling and induration of the os uteri, a profuse, excoriating leucorrhœa, and great *ardor urinæ*. I gave, in this case, Mercurius sol. and Podophyllin, in alternation, daily, which relieved in ten days the prolapsus, and reduced the os uteri to its normal size. The aphthæ yielded at the same time to a great extent, Belladonna relieving this symptom. Sulphur, Sepia, and Mercurius iodatus removed the leucorrhœa and swelling of the glands in three weeks' time. The 2d attenuation was used.

CASE III.—Prolapsus uteri, brought on by a violent strain, seven years ago. She was emaciated from violent suffering, loss of appetite, cold, and debilitating nightsweats, violent burning in hypochondriac region, extreme low spirits. Mercurius vivus 3d removed the nightsweats permanently; Podophyllin 3d removed the other symptoms, with the prolapsus, and she remains cured—more than one year.

Dr. D. G. Klein writes me:

I have cured a few cases of chronic prolapsus with the Podophyllum peltatum. I will cite the most important case:

Symptoms.—Great costiveness, stool once in three days, with great difficulty; frequent micturition, had to get up three or four times every night; great weakness and soreness of the back, especially after washing, etc.

Prescribed Podophyllum peltatum, a tincture prepared by myself from green root, not very strong, three drops a day in six tablespoonfuls of water, taken in three doses. In three weeks' time the case was entirely cured, bowels regular, no difficulty with the urine, and the back strong and without pain.

Induration of the Os Uteri.—Dr. Gatchell mentions, incidentally, that Dr. Brown, of Cincinnati, cured with a trituration of Podophyllin an induration of the os, which had resisted the efforts of the distinguished Professor Morrow until he abandoned the case in despair.

According to some physicians Podophyllin is useful in swelling and inflammation of the ovaries. Its general specific action on the glandular system would lead us to suspect it of the power of causing disease of those organs. I once found it beneficial in a case of chronic ovaritis, with symptoms like those in the proving. It is also useful in many of the disorders of pregnant females, especially when caused by a congested condition of the pelvic viscera; the morning sickness, or excessive vomiting of pregnant women, will often be relieved by this medicine. Eclectic physicians praise it highly in simple, recent amenorrhœa, but they use it as the allopathist uses Aloes, not homœopathically. In *congestive amenorrhœa*, however, it is homœopathic to the condition, and in minute doses will act curatively.

Dr. J. T. Talmage, of Brooklyn, New York, communicates the following experience with this medicine:

Podophyllum peltatum, and its active principle, Podophyllin, I have found curative of almost every morbid condition for which Mercurius sol., Mercurius dulcis, and Mercurius vivus have proven the homœopathic specifics. I have to that extent made them substitutes for the latter remedies. They are more radical and rapid in their cure than the minerals. I have especially found Podophyllin valuable in hæmorrhoids, both internal and external, for acute and chronic constipation, and all the morbid sequelæ attendant upon that condition, both during pregnancy and its absence.

Mrs. M., forty-five years of age, sanguine temperament, full habit, not through the "change of life," being sensitive to all atmospheric changes, with no tubercles in substance of lungs, with a large vomica, the remnant of an abscess many years since, has suffered for fourteen years from the consecutive stages of uterine disease, congestive inflammation, ulceration and induration of os uteri; also from retroversion, dysmenorrhœa, menorrhagia, and chronic constipation; only palliated, with few exceptional instances, by her allopathic adviser, Dr. Delafield, of New York, or his homœopathic successor.

By a proper homœopathic treatment she was cured of all her ills, except induration and constipation. The former was much relieved, but having been so long chronic had become organic, and is incurable. Her constipation, in addition to the usual discomforts, had the characteristic of waking her almost every night, not always at the same hour, with a severe abdominal colic in the umbilical re-

gion, which lasted from one to two hours. The only relief she could obtain was prophylactic, a laxative, the day prior. Homœopathic remedies had no effect either in high or low dilutions. Finally I prescribed Podophyllin, the first homœopathic trituration, a small powder every four hours. The constipation of years yielded, and an evacuation came the second day. Subsequently, powders of the same were given A.M and P.M. They made a permanent cure in ten days, both of colic and constipation.

Mrs. R. F., a lady in affluent circumstances, during the last two years passed through the hands of six physicians, three of whom were allopathic, and the other half homœopathic. They all treated her for dyspepsia, debility, and constipation. Obtaining no perceptible benefit from treatment, she finally put herself under my care. Judging from symptoms that her sufferings were the sequence of uterine disease, I proposed an examination with the speculum. It was acceded to, and I found extensive hypertrophy, ulceration, and prolapsus (the os uteri readily admitting the first two fingers of the right hand to the second joint, and presented itself very near the vulva).

In a few months I cured the hypertrophy, both of the os and fundus uteri, and the ulceration, and thereby much relieved the prolapsus.

The patient, within six months after the commencement of my treatment, became *enceinte*, and is now nearly eight months gone. With the cure of her uterine trouble she improved every way, in returning regularity of organic function, muscular and adipose development, increased strength, and freedom from hypochondria, one of her dependent complaints.

Chronic constipation, dysentery, and hæmorrhoids remained, and gave her frequent attacks of tenesmus uteri, tenesmus vesicæ, and tenesmus recti, abdominal colic, and severe sick and nervous headache. After a protracted trial of all the remedies, with but little effect, I at last, upon the patient becoming completely discouraged, prescribed, as an experiment, Podophyllin 1st trituration, every four hours. In two days she had a natural evacuation, and relief of all her troubles. Since then, two months, she has been daily regular, with one or two exceptions, when she stopped the medicine, thinking it no longer necessary. She now, and has most of the time, taken one powder a day.

The following symptoms would seem to indicate that it affected the *heart* in a specific manner:

Inclination to breathe deeply; sighing; shortness of breath; sensation in the chest as if the heart was ascending to the throat; sensation of suffocation when first lying down at night; palpitation of the heart, from exertion or mental emotion; * palpitation of the heart, with a clucking sensation rising up to the throat, which obstructs respiration; sticking pain in the region of the heart; palpitation of the heart from physical exertion, in persons subject to rumbling in the ascending colon; heavy sleep, and a feeling of fatigue on waking in the morning, followed by drowsiness in the forenoon.

The first curative symptom above was a case reported by Dr. Ward. It is to be regretted that a physical examination of the heart was not made, that we might know the condition of that organ. Such omission is to be deprecated in all clinical reports. The last heart-symptom is not marked with an asterisk in the original pathogenesis. Dr. Hempel, however, placed it in the "Symptomen Codex," probably upon good authority; in fact, the remark in parenthesis in the original (Jeanes's "Numerous Cases") would seem to imply that he had cured that symptom in numerous cases, although it might imply only that it had been indicated as a pathogenetic symptom. The *condition* of the heart which gave rise to those symptoms needs elucidation; taking the collateral symptoms into account, we should say it was a *sympathetic* derangement of that organ, from disease of the liver, occurring in a debilitated subject. I do not think the Podophyllin is capable of curing (although it may palliate) any seated or organic disease of the heart. As a palliative, however, and as an aid to Digitalis, it is very efficacious in those congestions of the liver with venous stasis and great torpidity. An appreciable dose of the 1^{x} trit. will promptly remove the congestion, starting the flow of bile, and relieve the overtaxed heart.

I will conclude my lecture by giving you the estimate of the value of Podophyllum from two representative men, one belonging to the eclectic, the other to our own school of practice.

I hope you will see therein some hopeful indications of the coming medical millennium, when physicians shall meet on the common ground of scientific truth—a time when bigotry and prejudice shall have been banished from professional life.

I will first quote the practical and investigating Dr. Scudder, editor of the "Eclectic Medical Journal," who has for several years adopted the homœopathic practice in part, and who is a close observer of the action of medicines, and believes in the value of "characteristic symptoms."

Within the year 1874 he has written several articles on the use of Podophyllin. He decries its *abuse* also, and condemns its routine use for the one indication, namely, constipation.

He says he has found several characteristic conditions and symptoms which always indicate the medicine, and, given either indica-

tion, it will cure the whole *ensemble* of symptoms with which the patient is afflicted. This is the same doctrine taught by our believers in "keynote indications."

The most prominent indication for Podophyllin, he says, is "*fulness of the superficial veins.*" This condition, he thinks, indicates an impairment of innervation of the sympathetic system of nerves. When this condition is present, he gives appreciable doses—from one-tenth to one one-hundredth of a grain every few hours. This is correct, for the condition is similar to the secondary effects of the drug. He says the Podophyllin should not be given in the opposite state, cold skin, imperceptible veins, pinched expression, etc. Why? Because he (Scudder) does not yet believe in attenuated doses. The fact is, that his contraindication is one of my keynotes—a condition similar to the severe primary effects of the drug, and for that condition the 6th or 12th dilution or trituration is perfectly indicated. We find that condition in cholera infantum, dysentery, dyspepsia, enteritis, and many other diseases characterized by prostration.

Dr. Scudder will find, if he tries the higher attenuations, that they will often act with surprising efficacy, when indicated by the primary toxic effects of Podophyllin.

He gives other characteristic indications for its use, some of which I had observed in my own practice before I read his papers.

I quote his words, italicizing his indications. In his case, where he mixes Podophyllin and Hydrastia, I should alternate them, only for the reason that a tenet of our school teaches that it is best not to use double medicines.

I will add, however, that it has not been logically proven, as a scientific fact, that double medicines are inefficacious. One of the most successful of German homœopathists, Dr. Leutze, habitually prescribed double medicines, and I know that many physicians in our school in this country do the same thing. There may yet be discovered some law which will permit the union of two remedies, and guide us in the administration of such medicines; but as yet I am not sufficiently convinced of the value of such a method, except in a few peculiar instances.

But to return to Dr. Scudder. He says:

A certain class of diseases of organs supplied from the sympathetic will be

marked by a *dull, unpleasant pain, or weight, in the hypogastric region.* The sensation is singular, and the feeling will sometimes cause the patient to bend forward to relieve himself. When the sensation is analyzed, it is referred to parts within the abdomen, and probably to the lower convolutions of the ileum. It is found in fevers and inflammations, but especially in dyspepsia, imperfect blood-making, disease of the spleen, irregularities of the bowels,—both diarrhœa and constipation,—diseases of the urinary apparatus, and the reproductive organs. In whatever disease found, especially if well marked and characteristic, Podophyllin will prove curative.

Among the queer indications for the remedy may be named *a sharply defined ache in the sacro-ischiatic foramina, with tenderness on pressure,* of which I may give a case. W., aged forty-three, has suffered from liver complaint, or something else, for years, for which he has taken liver (?) medicines in large doses, Podophyllin among them (and the Podophyllin pills always made him worse). For some months he has had pains in the course of the ischiatic nerves, for which he has taken various remedies without relief. Prescribed Podophyllin, gr. one-twentieth, with Phosphate of hydrastia, one-fourth; one pill daily. Was relieved of pain within one week, and rapidly regained his health. Quite as singular a case of what seemed and had been diagnosed chronic cystitis was cured with the same prescription, the remedy being prescribed for the hypogastric and ischiatic pains.

Let a patient complain of *pain in the course of the ulnar nerve,* and I would always think of Podophyllin as a remedy. Why? For no other reason than it cures such cases.

A rather common symptom, and a very good one to prescribe by, is *a peculiar stool, the first part large and hard, followed by fluid and wind.* Use Podophyllin triturated, or in small doses with the Hydrastia.

A *tongue full and broad,* with a *pasty coat in the centre,* is a good indication for small doses of Podophyllin, or even large ones. If I was induced to use the old-fashioned emeto-cathartic of Podophyllum, or *-in,* this would be the case.

A *red tongue* (not bright red), *with uniformly erect papillæ, rough,* will be an indication for Podophyllin (in small doses) in some cases.

I am not sure but a *dull-bluish color* of tongue is a good indication for the remedy, and would be glad if some of our readers will observe it carefully. Podophyllin in small doses is a stimulant to the sympathetic nervous system, and influences all vegetative processes, but especially those of digestion and blood-making. Some of our readers should rather keep this in view as the leading idea, and give it when such stimulation is necessary. This is well enough, but I like to prescribe for special symptoms. It gives the best result.

These special indications are valuable, and I advise you to make a note of them.

I have among my patients a lady who, once or twice a year, has attacks of *severe pain and swelling of both ankle-joints.* For many years she suffered weeks, and often months, under the treatment of various physicians of both schools, before she recovered. Finally, some physician gave her one-tenth grain doses of Podo-

phyllin thrice a day for a few days, followed by one-grain doses of Quinine, four times a day, for a few days. This treatment acted specifically and cured promptly. She has tried the Podophyllin alone and the Quinine alone, but neither cured; only when used together is an attack promptly arrested. We have often observed the same thing to occur in other diseases with other remedies. It would seem that it is a natural law that some remedies should precede or follow others. Hahnemann implies as much in many of his comments on the medicines in his "Materia Medica Pura."

Dr. W. S. Searle, of New York, in a paper entitled, "A glance at the Effects of Podophyllin," observes:

Upon the sensorium no marked primary action is discernible. As secondary effects, however, we find depression of spirits with fatalistic ideas, and vertigo with a tendency to fall forward. Secondarily, also, it produces other decided disturbances in the head. The prover complains of dull, heavy, pressing pains, which are confined to the forehead, temples, and vertex, and are relieved by external pressure. These pains generally occur in the morning on waking, and grow less during the forenoon. (The diarrhœa has also this morning aggravation.) As accompaniments of the pain, we observe drawing sensations in the eyes, and at times soreness at the seat of distress. It is noticeable that the headache may alternate with the diarrhœa, which the drug also produces.

In the eyes some hyperæmia of the conjunctiva is visible, with drawing, smarting, aching, and heavy sensations. These symptoms occur equally, whether the prover has ingested the drug or only been exposed to its dust.

The tongue exhibits a moist, white coating, and salivation is copious. The breath is offensive even to the prover himself, and a foul putrid taste disgusts him. The pharynx is at first full of mucus, but afterwards becomes dry. Then deglutition becomes painful, especially when swallowing liquids, and soreness, appearing first upon the right side, extends to the left, and upwards through the Eustachian tubes.

The appetite is diminished and soon satisfied, while a strong desire for acids is developed. What little food is taken is not well digested, for burning, acid eructations soon appear, and after a short time nausea sets in, rapidly increasing to vomitings. Some of the food seems to undergo putrefactive fermentation, for the ejecta have, at times, a putrid taste and odor. The vomiting is very protracted and often very severe, being accompanied by agonizing epigastric pain. Even after the stomach has been thoroughly emptied, the inverted peristaltic action continues, and extends also to the duodenum, so that bile, mingled perhaps with blood, is ejected.

Sometimes colic now puts in an appearance, but not seldom the disturbances in the abdomen are unaccompanied by pain. When colic does occur it is aggravated by lying upon the back, and relieved by bending forward. The intestines become distended with gas, and a profuse diarrhœa sets in.

Before the stool there is often a sensation of heat in the abdomen, while after it comes a feeling of great emptiness. Both colic and diarrhœa are worse in the morning. In the region of the liver, fulness, soreness, and stitching pains are developed, and similar feelings are complained of in the splenic territory.

In the morning aggravation of the bowel symptoms Podophyllum resembles Aloes and Sulphur, but may easily be differentiated from these. The stool of Aloes is a windy spurt of watery or slimy, yellow fecal matter, the desire for which can hardly for an instant be controlled from a seeming if not real weakness of the internal sphincter. Sulphur demands equal haste from tenesmus. It has a brown stool, not especially flatulent, and neither so scanty as that of Aloes, nor so profuse as that of Podophyllum. Podophyllum gets its victim up early, but not in so great haste as the others (probably because the internal sphincter alone is affected), and has a very profuse, yellow, or greenish stool—so profuse, indeed, that one wonders whence so much can come. It often contains undigested food, and is very offensive to the smell, having sometimes the odor of carrion.

Not seldom it is preceded by prolapse of the rectum. Accompanying it are excessive prostration, simulating even the collapse of cholera; constant, heavy, dragging pain in the back, which increases during and after stool; flashes of heat running up the back, and sometimes severe tenesmus. At a later stage mucous and muco-gelatinous stools occur, which may be streaked with blood. The whole alimentary canal becomes so irritable that the ingestion of food or drink at once renews the desire for stool.

As secondary and reverse effects, the stool becomes dry and hard, is voided with difficulty, and is covered with yellow mucus. This condition alternates with returns of the diarrhœa.

Similarly to the bowels the kidneys are affected. First comes enuresis with, at times, involuntary nocturnal discharge, and then follows diminished secretion. A sediment occurs, but its nature has not been determined.

Little is known of its effects upon the male organs. An eclectic druggist, however, states that those engaged in preparing the resinoid suffer from a pustular eruption upon the scrotum. Topically applied it produces similar effects upon other portions of the skin.

Upon the female organs its influence varies with the time of its administration. Given at or near the time of menstruation, it hastens and increases the flow of blood as well as of vaginal mucus. But, if sufficient interval occurs between the dose and menstrual nisus for the primary effect of the drug to disappear, the secondary and reverse symptoms obtain, viz., amenorrhœa and dryness of the vagina. It is noticeable that it produces prolapse of the vagina as well as of the anus.

Upon the respiratory organs its influence is slight and purely reflex. This is also true of the few symptoms which are developed in the extremities.

It is susceptible of physiological interpretation. It attacks the involuntary muscles, particularly those of the bloodvessels which supply the alimentary canal, with its adjacent and contributing organs. In this way it affects the kidneys, uterus, and the heart itself. Of the involuntary sphincters, moreover, it causes a paresis.

Beginning with the mouth and salivary glands, the result of such a paresis of the bloodvessels would cause stasis, passive congestion. The capillaries are relaxed and overdistended; their lattice-like tissue opens, and out pour floods of serum and protoplasmic masses; epithelial activity is stimulated, and an imperfect, half-elaborated, and abundant secretion is the result. The same conditions produce like effects in the mucous membrane and glands of the stomach, and hence a similarly inefficient gastric juice is deluged upon the food. This, together with the directly irritant effect of the drug upon the surface of the stomach, induces nausea and vomiting. The same results are seen in the intestinal canal. It pours forth a superabundant secretion. The decomposition of the undigested food, and perhaps also the irritated mucous membrane itself, furnish the gas which distends the intestine and pains its irritated nerves; and hence the colic and the flood of fecal discharge.

Upon the liver, spleen, kidneys, and uterus its effect is the same in kind, and therefore each discharges profusely its half-elaborated production.

Upon the muscular fibres of the heart the action of the drug is particularly powerful. The beat becomes feeble, the pulse weak—then scarcely perceptible; the surface of the body is bathed in a cold and clammy sweat; and thus death by collapse steals on.

The involuntary sphincters are enfeebled, so that the rectum and vagina prolapse, and the sphincter vesicæ fails to perform its whole duty.

All the glands above mentioned have their parenchyma distended, and hence come the sensations of weight, dragging, fulness, soreness, etc., in them all.

Nothing but secondary symptoms remain for which to account. The heavy, dull, frontal headache with which the prover awakes from a stupid sleep is easily explicable. The secretory organs, which have lately been so active, have now reacted against the influence of the drug; their capillaries have contracted and secretion has fallen below the normal standard. Such a condition produces just these kind of head symptoms. In confirmation, we may refer to the fact that after the diarrhœa has ceased and constipation begun, occasional returns of the former occur, and with the recurrence of the loose stools the headache disappears.

We have only a few outlines of the secondary picture; but these, together with the primary picture and our clinical records, complete the drawing. Here also Podophyllum is often valuable.

Beginning with the head, and coming to the mouth and throat, we find a dry, yellowish tongue; a foul, bitter taste, and thirst, with very little appetite. The pharynx is dry and deglutition painful. The stomach is irritable and the gastric juice small in quantity. Owing to the diminished secretion of bile (or perhaps rather to its retention and re-absorption) there is more or less jaundice, and the stools become pale, dry, and hard. The urine is scanty, charged with sediment, and colored yellow by the biliary acids. There is also, in women, amenorrhœa, with its train of consequences.

Crowning all, and growing out of the irritable condition of the heart itself, together with the stimulus reflected upon it from other excited organs, comes general fever.

To this congeries of symptoms Podophyllum is secondarily homœopathic.

What does this practically mean? I confess I do not know. Hale would tell you it means that, to be curative in these conditions, it must be administered in small doses. But some facts are decidedly against Hale's law of dose. For instance, Dunham, in his lecture on Graphites, says he has been equally successful in the treatment of the diarrhœa and constipation which are cognate to this drug, with the two hundredth attenuation. (The antipsorics have no primary and secondary symptoms.—HALE.)

Multitudes of similar facts can be adduced from our clinical records, and we must therefore remit the whole matter to those who feel competent to deal with this vexed question of the dose.

To what diseases is it applicable?

First, and most accurately, to bilious fever. With this as a type we shall not go far wrong in its administration. It has been praised for its curative power in typhoid forms of fever; in the genuine zymotic fevers it may be given as an intercurrent in persons of a bilious temperament.

In intermittent fever it may, at times, be useful in a similar way, but it is better adapted to the remittent type, which is generally bilious *au fond.*

In the treatment of gallstones its use is, of course, purely toxical.

Is there any warrant in the pathogenesis for supposing that it is more than a mere function-remedy? If my physiological reading of it be correct, I think there is. In such conditions of vascular stasis as have been described, the white blood-corpuscles and other more minute particles of protoplasm pass through the meshes or stomata of the capillaries, and wander by their inherent power of locomotion into the various neighboring tissues. Here they grow and multiply, and by their transformations bring about the series of phenomena which we call inflammation. Hence, we may prophesy that it will be useful in gastritis, hepatitis, enteritis, dysentery, and perhaps even in nephritis and metritis. However, should it ever be appropriate in such forms of disease, we should expect to find in the history of each case an incipient stage when the symptoms corresponded to those existing in the proving.

I have thus endeavored to *characterize* Podophyllum, and if it has afforded you as much information as the study of the drug has me, I am fully repaid for my trouble. . . . .

Lactic acid is an effectual antidote to the effects of it. Fifteen grains have been given, and immediately afterwards a draught of sour milk, and the effect of it has been *nil.* Sugar antidotes it somewhat; common salt increases its action; Acetic acid does not affect it. In *gout* it is useful after acute symptoms have subsided, or in cases where the attack is preceded by premonitory symptoms it is indicated at once. It will ward off an impending attack of gout. It had good effects in jaundice when it had returned again and again after China and Mercurius. The following inferences are drawn from the facts related:

First. That it is a very active and penetrating medicine, resembling Calomel in its specific action on the liver and glandular system, but beyond that the similarity ceases.

Second. That its direct sphere of action is the whole portal system, and indirectly all other systems connected with that either by nervous or vascular ties.

Third. That while the liver and gall-bladder are directly acted upon by this

medicine specifically, and led by it to discharge their contents, great relief is given to the lungs and the brain when oppression of these vital organs is connected with inactive and irregular action of the liver.

Fourth. That torpidity of liver, rather than vascular congestion, is the chief sphere of it; in other words, a non-secretory state, or a state of non-expulsion of the secretion of bile, is the indication for it, and this state is indicated by sallow complexion, furred tongue, and constipation.

Fifth. That the curative dose in such cases must be brought near to the physiological, viz., the 10th, 5th, or 4th of a grain, given once, or, at the utmost, twice a day, and immediately arrested if diarrhœa appears.

Sixth. That the middle dilutions ought to be prescribed for the other diseases in which it is indicated,—diarrhœa, dysentery, prolapsus ani or uteri, etc.

Seventh. That the diseases in which it has been found most serviceable by the writer are gout, erysipelas, spasmodic and bronchial asthma, and chronic bronchitis, and in all these diseases only as an intercurrent. (The writer has not had any personal experience of its benefit in syphilis and goitre, and cannot, therefore, affirm or deny its power in these diseases.)

Eighth. That it is not specially indicated in hepatitis, nor in any of the early stages of acute disease, save in the diarrhœa and dysentery for which it is homœopathic.

Ninth. That it ought never to be given where a simple aperient is required, as in cases of undigested food, lodgments in the cæcum and colon, etc. Its use should be restricted to liver constipation.

Lastly. While a specific has been defined by Dr. Drysdale as a remedy in which the whole physiological is absorbed into its therapeutical action, there are some exceptions, and this I believe to be one of those where the boundary line between the physiological and therapeutic action is not easily defined, and where we are most certain of the therapeutic efforts when we touch the physiological sphere.

I quote the valuable differentiation of the analogues of Podophyllum, by Dr. Farrington:

PODOPHYLLUM.	MERCURIUS VIVUS.
MIND.	
Low-spirited; fears he is going to die; hypochondriacal.	Fears loss of reason, fears he will become insane; anxious.
HEAD.	
• Throbbing temples, eyes ache, head hot, *morning.*	Splitting frontal fulness, head hot; *evening, night.*
Rolling head; grinding teeth; whining at night; head sweaty in sleep; flesh cold. Dentition difficult.	*Fontanels open; restless sleep, moaning, groaning;* sweat all over, *clammy,* cold, sour. Dentition difficult.

PODOPHYLLUM.	MERCURIUS VIVUS.
EYES.	
Ophthalmia scrofulosa, even perforation of the cornea; *worse in the morning.**	Ophthalmia scrofulosa, pustules on the cornea; lids crusty; *worse evening and night.*
MOUTH, THROAT.	
Breath smells foul.	Breath smells fetid.†
Tongue *white*, dry.	Tongue *yellow, moist, flabby.*
Saliva copious.	Saliva copious, fetid.
Throat sore; worse right side; swallowing liquids; *in the morning.*	Throat sore; worse left side; swallowing saliva and liquids; *evening air.*
STOMACH, ABDOMEN.	
Nausea, *gagging;* vomit of blood, bitter; or, painful retching.	Nausea; vomit bile, bitter or *sweetish* (as from worms).
Flatus in the right abdomen; palpitation, sleepy mornings.‡	Flatus not so marked as in *Podophyl.; fulness in stomach and hypochondria.*
Liver feels hot, sore; twisting pains; better from rubbing that region; costive; stools hard, dry, difficult.	Liver so sensitive he cannot lie on the right side or bear the least touch; costive, with ineffectual straining.
Colic (as from lead), with *retraction of the abdominal walls.*	Colic as from worms; sweet taste; *hard, tender, distended abdomen.*
Stool *chalklike, offensive, with gagging; clay-colored;* black; *watery, profuse, painless, gushing, exhausting;* mealy sediment; bloody, green, yellow mucus, *smelling like carrion;* worse towards morning, *in the morning.*	Stool tenacious, crumbling, small in shape; grayish-white; black, pitch-like; not gushing, but burning; *watery, corrosive; bloody mucus, slimy, with much tenesmus; odorless* or simply sour; worse usually *evening and night.*
After stool, exhaustion; cutting pains; weak, even after natural stool.	After stool, cutting and great tenesmus; sweat; trembling; burning in anus.
Prolapsus recti from any exertion; with diarrhœa.	Prolapsus recti inflamed, black; when straining.
URINE, GENITALS.	
Urine scanty, frequent at night (pregnancy).	Urine scanty, with constant, violent urging.
Dragging pains in the ovarian regions.	Shooting from ovaries to hips; suppuration.

* In compounding Mandrake pills, the dust causes inflamed eyes, perforating ulcer, itching eruption, worse about the genitals. The morning aggravation is marked, *Merc.* is worse from the glare and heat of the fire.

† This fetor comes from ulcerative processes; the foulness in *Podophyl.* is indescribable.

‡ A group many times confirmed by Dr. Jeanes.

PODOPHYLLUM.	MERCURIUS VIVUS.
Prolapsus uteri, with backache at sacrum; *after confinement; from washing; with prolapsus ani;* with amenorrhœa; stool frequent, though natural.	Prolapsus uteri et vaginæ, with soreness *of the genitals, externally and internally;** much urging in the rectum; stools crumble, or slimy, bloody.
Pregnancy. Can lie comfortably only on the abdomen (early months); frequent urination; prolapsus uteri after.	Pregnancy. Stomach very sensitive to touch or pressure; scorbutic symptoms, sore gums, etc.; lochia, with *sore genitals.**

CHEST.

Cough in remittent fever; loose during dentition; whooping-cough, with constipation and loss of appetite.	Cough, with burning and rawness, moist, but phlegm does not loosen; so convulsive cannot speak; whooping-cough in two paroxysms.
Palpitation from any exertion, *with flatulence;* heart as if it came into the throat.	Palpitation on *awaking, thumping, agitation;* trembling or feeling as if life were ebbing away.

FEVER.

Pulse slow; scarcely perceptible; pulseless, collapse, chill 7 A.M.; forgets the words.	Pulse usually full, strong; pulseless, with hot body. Chill A.M.,† but more *evening.*
Heat, with delirium and loquacity; afterwards forgetful of what has passed.	Heat, with ebullitions, constriction of the chest; anxiety.
Sweat, *warm* on the legs; feet cold; head-sweat, with coldness of the skin; sleep during sweat.	Sweat *cold,* clammy on the legs; cold sweat on the forehead; skin burns; *sweat never relieves.*
Flashes up the back and abdominal pains during stool.	*Chilliness between or after stool.*

GENERALITIES.

Worse from walking on uneven ground; misstep.	Worse from any form of motion.
Worse in *the morning.*	Worse *evening and night.*
Worse from *acid fruit with milk.*‡	Worse from sweets, from *sugar.*

* This soreness is very characteristic, and indicates *Mercury* in scarlet fever, etc.

† The morning chill is after rising from bed; but the evening attack is most important. This collect of symptoms is invaluable in bilious fevers.

‡ *Podophyllum* has received the name of *Vegetable mercury.* It helps promptly in dyspepsia caused by *Calomel.*

PODOPHYLLUM.	SULPHUR.
Anxiety, fears he is going to die.	Anxiety; despairs of salvation.
DENTITION. *Rolls the head, grinds the teeth;* child whines at night, restless sleep, half-open eyes; head sweats, legs cold, face cold; vomiting frothy mucus, green; or food; or only *gagging;* stools profuse, gushing, green, watery, or white; offensive; *from midnight, but worse in the morning.*	DENTITION. *Child lies in a stupor, eyes half open,* or sleeps in *cat-naps,* jerks the limbs; fontanels open, pale face, cold sweat on face, cold extremities; vomiting *sour-smelling;* stools watery, green, involuntary, white, sour, or offensive; *irresistible, sudden urging in the morning.*

STOMACH, ABDOMEN.

Eructations *hot,* sour; smell like rotten eggs.	Eructations sour; taste like rotten eggs.
Worse from acid fruits *with milk.*	Worse in every form from *milk.*
Tongue white or brown.	Tongue white, *red tip.*
Flatus in the right abdomen; palpitation; sleepy forenoon.	Flatus mostly in the region of the sigmoid flexure.
Bowels move after being washed.	Aversion to washing; generally worse therefrom.
Colic, with cramplike knots or retraction of the abdominal walls.	A similar cramping as if the intestines were in knots; pains go to chest, to groins.

The stools are very similar: changeable, watery, green, mucous, white, undigested, with colic, cramps in the thighs; vomiting, purging, with prolapsus ani (more marked in *Podophyl.*). They meet, hence, in cholera infantum, cholera, summer diarrhœas. *Sulph.* has, with *Podophyl.*, the profuse, gushing, painless stools, but has more marked the *excoriation and redness of the anus.* It pictures, according to Hering, the *whole course of Asiatic cholera;* hence becomes a prophylactic. *Podophyl.* may apply in painless cholera morbus, and in cholera when cramps, profuse discharges, prostration, etc., are present. In cholera infantum *Sulph.* shows its supremacy as a nutritive remedy.

Drowsiness, or restless sleep, rolling the head; flesh is soft, flabby; sallowness.	*Stupor, suppressed urine* (hydrocephaloid impending); *flesh wrinkled, yellow, dry; child looks like an old man.*

FEVER.

Remittent or intermittent type; forgetful during the chill; loquacious delirium in the heat, violent headache.	More a *continuous remittent* type; between chill and heat delirium sets in; prostration, increasing with the congestion and heat; headache.

PODOPHYLLUM.	SULPHUR.
Tongue coated uniformly white, yellow, or brown; jaundice.	Tongue dry, if coated, more yellow-brown centre; jaundice.
After the hot stage forgets all that has passed.	Fever if continuous, causes *slowness in responding.**

PODOPHYLLUM.	NUX VOMICA.
HEAD.	
More depression of spirits.	More irritability, anger.
Morning headache; *hot vertex.*	Morning headache; *heat in the forehead.*
EYES.	
Ophthalmia worse in the morning; perforation of the cornea.	Ophthalmia worse evening and morning; ecchymosis of sclerotica.
FACE.	
Complexion sallow, dingy.	Complexion yellow, *with a red flush.*
MOUTH, THROAT.	
Breath *foul* (night).	Breath offensive, *morning.*
Throat sore; worse from swallowing liquids.	Throat sore as if raw, scraped; worse after eating, from solids.
STOMACH, ABDOMEN.	
Tongue white or yellow coated.	Tongue red, sore, and coated yellow at the base.
Dyspepsia from abuse of calomel.	Dyspepsia from abuse of drastic medicines.
Vomit *hot, sour,* bilious, bloody.	Vomit *sour* or bitter, of dark blood.
Flatus in the ascending colon; palpitation; drowsy forenoons.	Flatus in the hypochondria, *pressing upwards or down on to the bladder and rectum.*
Region of the liver sore; *relief from rubbing the right side;* stools black or clay-colored; jaundice; stool difficult.	Region of the liver worse from pressure; *must loosen the clothing;* stools black, large, *ineffectual urging;* jaundice.
Stool difficult from inactive bowels; *prolapsus ani even with loose stool.*	Stool difficult from spasmodic action; *hence ineffectual urging;* prolapsus ani.
Stool *watery, gushing, profuse,* green; *with sudden urging,* often painless; offensive; worse in hot weather.	Stool thin, brown, dark water, small, frequent, offensive; ineffectual urging, worse in cold changes.
URINE, GENITALS.	
Urine scanty, frequent; or frequent urination during pregnancy.	Painful, ineffectual urging to urinate; even in pregnancy frequent urging.

Prolapsus uteri after washing, after parturition, has frequently yielded to either.

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* The latter is an observation of Dr. C. Wesselhœft.

PODOPHYLLUM.	NUX VOMICA.
Prolapsus, *with falling of the rectum;* stools are *naturally formed, but too frequent and weakening;* sacral pains; aching in ovarian region.	Prolapsus, with urging to stool; stools large; *backache worse turning in bed;* tightness in the hypochondria; cough dry, teasing.
After-pains, with much bearing down, flatulency.	After-pains too long-lasting; pressure on the rectum.
In pregnancy (early months), must lie on the abdomen; (later) pains above the right groin.	In pregnancy (especially later months) *difficulty of breathing from upward pressure.*

LARYNX, CHEST.

Whooping-cough, with costiveness, loss of appetite; cough in intermittent fever; cough during dentition.	Whooping-cough, with costiveness, nose-bleed; "stomach" cough; cough of students.
Palpitation of the heart from physical exertion; flatulence; drowsy forenoons.	Palpitation of the heart, the heart feels tired; palpitation lying; wind from the stomach.

SLEEP.

Whining in sleep (teething children); languid on awakening in the morning.	Awakens 3 A.M., ideas crowd upon him; if he falls asleep, he reawakens much fatigued.*

FEVER.

Chill 7 A.M.; forgets words he wishes to use.	Chill P.M.; goes to sleep between chill and heat.
Heat, with delirium and *excessive loquacity,* thirst, headache; forgetful afterwards.	Heat, with *overexcited senses,* worse from external impressions.
Sweat warm on the head, with cold face (dentition); sleep in sweat.	Sweat clammy, sour, or offensive; one-sided sweat.

GENERALITIES.

Debility (especially with bowel disturbances).	Debility, *with oversensitive nerves.*
Complaints of teething children.	Complaints of "high-livers."
Abuse of Calomel; eating acid fruit with milk; poisoning with lead.	Abuse of purgatives; indulging in liquors; poisoning with lead, copper.

* *Nux vomica* has a whimpering and moaning in sleep; waking from troubled, busy dreams, frightened, as if some one were in the room. (Typhus, mania-à-potu.)

PODOPHYLLUM.	CHELIDONIUM.
MIND, HEAD.	
Forgetful during the chill.	Difficult thought; forgets easily.
Low-spirited; imagines he will die or be very sick; liver affected.	Troubled, weeps, must move from place to place; liver affected.
Dull headache, with pain behind the eyes (liver affected).	*Neuralgic pains from occiput to left ear; occiput heavy* (liver affected).
FACE.	
Eyes inflamed in the *morning;* scrofulous ophthalmia.	*Lachrymation*, with fistula, with neuralgia; when looking fixedly.
Complexion sallow, as in jaundice.	Sallow or sunken, gray; blue around the eyes.
Not yet given in neuralgia of the face.	*Right supraorbital neuralgia; eyes water.*
MOUTH, THROAT.	
Tongue white, furred, or yellow.	Tongue *narrow, pointed,* or thickly furred.
Throat sore; worse right side; in the morning; swallowing liquids.	Constricted feeling above the larynx; sensation as after swallowing too large a morsel.
STOMACH, ABDOMEN.	
Taste *foul; breath foul.*	Taste *bitter.*
Dyspeptic symptoms from *abuse of Mercury; liver torpid,* with soreness, fulness in the right hypochondrium, *better from rubbing; costive, clay-colored stools; sallow complexion, putrid breath, furred tongue;* dull headache; aching behind the eyes; *loathing or regurgitation of food; worse after eating.*	Dyspeptic symptoms, with liver complications, indicated by *pain under angle of right shoulderblade;* congestion of the liver, with *sharp stitching pains, throbbing;* costive clayey stools; jaundice; *pain from occiput to left ear; longing for milk, coffee, they agree; better* (pains) *after eating.*
Diarrhœa from acid fruit and milk; during dentition; discharges yellow, green, slimy.	*Diarrhœa better from milk; during pneumonia; capillary bronchitis; discharges bright yellow.*
CHEST.	
Loose cough, rattling on the chest during dentition. Whooping-cough, with constipation and loss of appetite. Cough associated with remit-	*Rattling cough, with capillary bronchitis; bright-yellow diarrhœa.* Whooping-cough, with forcible expectoration of lumps of mucus. Pneumonia with one

PODOPHYLLUM.	CHELIDONIUM.
tent fever, lessening during the remissions.	cold ear and foot, one warm; great oppression; fanlike motion of the alæ-nasi; pain under the right scapula.
Palpitation of the heart from physical exertion; as if the heart were ascending into the throat; *rumbling in the right abdomen; morning drowsiness.*	Palpitation *so violent as to shake the bed;* stitches in the heart; great anxiety; often associated with congestion of the liver and portal system.

BACK.

Lumbar backache after washing, with prolapsus uteri; diarrhœa.	*Pinching, spasmodic pains on the inner edge of the right scapula.*

SLEEP.

Whining, moaning in sleep; rolling the head (teething).	Sleepy, yet cannot sleep.*
Sleepy in the forenoon, with flatus in the ascending colon.	Heavy sleep all day in patient's suffering from portal congestion.

PLANTAGO MAJOR.

The oldest common name of the Plantain is "*Waybread.*" The characteristic symptoms, in Vol. I, were taken from Dr. F. Humphreys's "Monograph," to which Dr. Hering contributed from his immense and apparently exhaustless stores of pathogenetic lore.

My industrious coadjutor, Dr. S. A. Jones, once published, in the "American Homœopathic Observer," a supplement to Hering's "Classical History" of the plant, which covers its history during a period dating from A.D. 1000 to the dawn of the eighteenth century.

The ancients used it in *intermittent fevers.* An infusion was prescribed, to be taken two hours before the expected paroxysm. The provings do not give us a clear picture of intermittent or remittent febrile paroxysms, although some of the symptoms bear some resemblance to miasmatic fever.

Dr. G. Washburn (homœopathist) claims to have cured agues with the tincture and 1^{x} dilution. The testimony relating to ague-remedies cannot always be considered reliable, owing to the singular character of that disease.

* All the Papaveraceæ have this symptom.

Plantago seems to exercise a specific irritant action on the skin when taken internally. The irritation takes the form of *prurigo, urticaria,* and *papulæ,* accompanied by severe itching, pricking, and burning sensations.

It does not seem capable of causing actual *lesions* of the skin.

In domestic practice it is constantly resorted to as an application in all affections of the skin, with irritation, pain, and heat. The leaves are wilted and bruised, and applied upon the affected part.

It certainly possesses some other than a simple emollient influence, for the testimony that it relieves pain and ameliorates the inflammation is almost universal.

By reference to the clinical cases published in the pathogenesis (Vol. I), you will see that the external application of a lotion of the tincture, infusion, or leaves, has been of great benefit in *erysipelas, rhus-poisoning, erethyma, burns, scalds, inflammation of glands* (notably the *mammæ*), *bruises, incised wounds, bites of animals, frostbites, chilblains,* etc.

The surgeon should not disdain the use of this simple herb, for the testimony of Drs. Washburn and Cresson shows it to be a powerful curative agent in some very severe and painful injuries.

It is recommended for *worms,* and it has one sleep-symptom which is very suggestive of verminous affections, namely, "*grinding of the teeth at night.*" The mental symptoms are of the same character that we find in children afflicted with *helminthiasis.*

It appears to be a grand remedy for *odontalgia.* It had a reputation for the relief of toothache even among the ancients. In the "Herbal of Dodoens," A. D. 1558, we read:

> The juice or decoction of the leaves or roots do cure and heal the naughtie ulcers of the mouth, the *toothache,* and bleeding of the gums.

John Parkinson, in his "Theatre of Plants," A.D. 1640, says:

> The root, taken fresh out of the ground, washed and gently scraped with a knife, then put into the *ear* (?), cures the toothache like a charm.

In the provings you will find that it *causes* toothache in sound and carious teeth; also sensitiveness of the teeth to cold air and

contact, and they feel very greatly elongated. The symptoms resemble those of Mercurius.

Dr. Reutlinger narrates the singular manner in which they cure toothache with the Plantain in Switzerland. The leaf-fibres are frayed out and put in the ear of the affected side.

Curiously enough, in cases benefited by the remedy, these fibres become *black*, and are then renewed, while, if no relief is experienced, they remain green.

Dr. R. states that with the 2^x dil. of the plant he *cures seven-tenths of all cases of odontalgia in about fifteen minutes!*

Dr. Humphreys confirms this statement. I was at first inclined to doubt its efficacy, but have been obliged to admit its value, for of all homœopathic remedies for toothache, none can compare with the Plantago.

It cures when taken on the tongue in the attenuations, and applied to the cavity of a carious tooth on cotton. I have never tried the plan of putting it in the ear.

It is alleged to be useful in *otalgia*, applied in the same manner. The warm juice of the leaves, or a wilted leaf, rolled up and put in the ear, is a popular remedy for earache.

It has been used successfully in *colic*, *diarrhœa*, and *dysentery*, and some physicians of my acquaintance value it highly in *summer complaint* and *cholera infantum*.

The urinary symptoms are noteworthy, and I predict a sphere of usefulness in that direction. It has only been used successfully in *enuresis*. It appears to be especially applicable to the *nocturnal enuresis* of children, particularly when depending on laxity of the sphincter vesicæ. The urine in such cases is pale, profuse, and watery. When actual *paralysis* is present, or when the urine is scanty, it is not so effectual. It acts better in children than adults. I suggest that it may be useful in wetting the bed from the irritation of worms.

I have seen the happiest effect from the application of warm, wilted Plantain leaves in *mastitis*. It allays the pain and mitigates the heat and swelling. To make them more effectual, spread on them a piece of oiled silk, or oiled paper, to prevent evaporation.

POLYGONUM PUNCTATUM.

This species, commonly known as *Smart-weed*, from its peppery, pungent taste, is quite popular as a domestic remedy in all parts of the United States.

Applied externally, it causes a gentle stimulation of the skin, not as severe as that of Mustard, but enough to produce an erythema of the surface, if applied for a long time.

This action on the skin is taken advantage of in cases of internal pain, cramp, etc., and the application of the leaves of Smart-weed, saturated with hot water, is quite generally resorted to in such cases. You will find it difficult to prevent nurses, and your patients generally, especially in the country, from using these applications; and I see no reason why you should oppose their use, nor the use of Mustard, for they often do good and can do no harm, and the idea that they interfere with the action of our medicines, even in the highest potencies, cannot now with reason be urged against them.

We have extended provings of the Polygonum, made by some of the best physicians of our school.

These provings go to show that its sphere of action is on the mucous surfaces, the nervous system, and fibrous tissues.

Perhaps the disorder for which it is most popular is *colic*. The provings give a very good picture of *flatulent colic*.

Dr. W. E. Payne says:

> That in the only instance where an opportunity was offered for testing the truth of either of the therapeutic indications above deduced from the provings of the *Polygonum*, there was cutting, lancinating, griping pains, with great rumbling, as if the whole intestinal contents were in a fluid state and in violent commotion; the movement proceeding from below upwards, producing nausea and disposition to vomit, with liquid fæces, which were discharged with considerable force, together with pain in the loins.

This case, in both its symptomatic and pathologic manifestations, was an exact representation, an exact counterpart of the abdominal affection as it appeared in the above proving. The *Polygonum*, therefore, was selected as the remedy. Two teaspoonfuls were taken at once, of a mixture of fifteen drops of the tincture to eight ounces of water. A sensation of warmth diffused itself

throughout the abdomen, with immediate diminution of the symptoms, and at the expiration of about an hour the whole disease had disappeared, except soreness on pressure, which gradually passed away.

A fomentation of the leaves, or the application of the tincture to the abdomen, doubtless aids in removing the severe pains of enteralgia.

The provers were all men; but a large amount of clinical experience has been obtained which seems to prove that it acts somewhat like Pulsatilla in diseases of women.

Drs. Tully, Eberle, Wood, and others, class it among the emmenagogues. Dr. Eberle states that it causes the following symptoms: "Warmth, and a peculiar tingling sensation throughout the whole system; in most instances, slight aching pains in the hips and loins; a sense of weight and tension within the pelvis." He states that he has used it in about twenty cases of *amenorrhœa*, and says: "I can affirm that with no other remedy or mode of treatment have I been so successful as with this. I have seldom found it necessary to continue its use for more than six or seven days before its emmenagogue powers were manifested." He says that those to whom he has recommended it found it effectual. He used it in the form of a saturated tincture, in doses of a teaspoonful three times a day. The warm infusion is used successfully in domestic practice—a wineglassful every few hours. I have known this simple treatment to prove effectual after all the tried remedies had failed.

POLYMNIA UVEDALIA.

BEARSFOOT.

Bearsfoot belongs to the genus *Compositæ*, of the tribe *Heliantheæ*. It is an erect herb, roughish, hairy, stout, four to ten feet high, leaves broadly ovate, angled and toothed, nearly sessile, the lower palmately lobed, abruptly narrowed into a winged petiole, outer involucral scales very large; rays ten to fifteen, linear oblong, much larger than the inner scales of the involucre; flower *yellow*. Grows in rich soil west of New York to Illinois, and southward. The

flower and whole plant exhale a strong odor; they look like a small sunflower.

This remedy was introduced into eclectic practice by Dr. Pruitt, of Missouri (?), who found it useful for enlargement of the spleen. He recommended that it be applied externally, in the form of an ointment, and given internally. It was found so efficacious in this disease, that it was tried in other enlargements, of the joints, glands, etc., and finally in *enlargements of the uterus*. I have used it in two cases with success—in uterine hypertrophy (areolar hyperplasia) in the first stages, before condensation and contraction set in. The dose is ten drops of the tincture, or 1ˣ, three times a day, or oftener, and its use continued for months; at the same time apply a glycerole (one part of the tincture and two parts glycerin) in cotton tampons every night, except during the menses. In my two cases the uterus decreased in size fully one-third in two months.

Dr. Scudder gives the following as his experience, with an estimate of the power of this new remedy:

Let me again say that Uvedalia is the straight remedy for those engorgements of tissue depending upon an enfeebled circulation. The sensation given to the fingers is a want of elasticity and tonicity, sodden, doughy, atonic.

I use the Uvedalia ointment freely, and think of rubbing away a hypertrophied uterus, or an enlarged joint, as much as I would an enlarged spleen or ague-cake. Recently I had occasion to use it in chronic ovaritis and metritis, the cavity of the uterus measuring four inches. The organ was reduced to normal size in four weeks.

Internally it has not gotten to be such a favorite, but this is because I have not tried it so often. I am satisfied that in many cases of chronic disease it will be found a most valuable remedy, as it very certainly is in chronic ague with enlarged spleen.

I am sure those who have used it will feel much obliged to Dr. Pruitt for his efforts to bring it to the notice of the profession.

PROTOSULPHIDE OF MERCURY.

The use of this medicine in *typhoid fever* is attracting the attention of English and European homœopathists.

Dr. Serres, of Paris (allopathist), was the first to use it, but in the crude form.

Dr. Petros was the first homœopathist who used it in typhoids, and always in the 12th potency. He left on record two cases

which illustrate its action, and give the groups of symptoms for which it is indicated.

Dr. Von Tunzelmann, of London, has lately brought it again to notice, and gives some additional indications for its use. I have collected all the known indications (no provings have been made), and arranged them in the following groups:

Febrile heat, pungent, pulse small, weak, 120–130; great weakness; *paleness* or flushing of the *face* in the middle and after part of the day. *Drowsiness*, or wakefulness, with restlessness; unconsciousness, with delirium.

Headache in the forehead. *Eyes* with dark circles under them; *lips* dry and shrunken; *tongue* shrunken, covered with a dark-brown crust, stiff, dry, and black.

Abdomen tender, particularly in the cœcal and epigastric regions, distended (tympanitic). *Urination* frequent, scanty.

Diarrhœa—bilious, dark-yellow, watery, preceded by colic; followed by fainting; not profuse or frequent, only two or three evacuations a day.

Pathological Indications.—Dr. Petros says this remedy is unsuitable in the *first* stages of typhoid. Dr. Von Tunzelmann says:

> I should say that the place of the Protosulphide of mercury in typhoid fever is between *Baptisia* and *Arsenicum*, in cases where *Baptisia* has not been able to arrest the progress of the disease, or where the case has not been seen within the first ten days, and the local lesion in the solitary and aggregated glands of the ileum not had time to become distinctly developed; at the same time absence of marked diarrhœa, showing that no great amount of ulceration of the mucous membrane at the seat of the inflamed glands has taken place.

I should say that *Merc. sulphide* comes after *Baptisia* and before *Terebinthina*, for generally *Arsenicum* is not indicated until after *Turpentine* has been used.

I have lately seen a singularly high encomium of the antiseptic powers of the "Ethiops Mineral," as this is called in a Spanish medical work by Dr. Murino.

The following extracts from Dr. Murino's book are given:

> Professor Socrates Cadet, for a long time devoted to the study of contagion, in order to discover an efficient means to annihilate or neutralize it, found that

Ethiops mineral (black Sulphuret of mercury) possesses the two virtues above mentioned, namely, to abolish the contagion, and yet to prove innocent in regard to the person using it. He subjected it to every proof; wrote to his colleagues in the profession; and the solemn and indisputable facts have confirmed his theory. And that Ethiops mineral is truly an anchor of safety, in such diseases, by the testimony of solemn and well-known facts, and of men the most learned and distinguished, is also proved by the special nature of contagion, which, being parasitic, cannot but be subdued by that salutary agent which is *par excellence* an antiparasitic.

Then with a full consciousness of what I am uttering, with my "soul in my pen," if an antiquated expression will be pardoned, with a profound conviction, the result of a varied experience instituted by myself in cholera, in croup, in diphtheria, and in convulsive cough, I call upon all parents, all instructors, those in charge of institutions, and, in general, all heads and directors of industrial establishments, arsenals, colleges, and schools, who wish to preserve themselves, their children, and dependents, from communicable diseases, on every invasion of contagious maladies, to provide themselves with Ethiop's mineral, and to take it and administer it every day to those under their care, with a view to preserve them wholly from the threatening contagion.

I know that many, even among physicians, will smile at the idea of Ethiops mineral producing such marvellous effects; but let those deride who have not seen, as I have seen, cholera in ten persons cured with Ethiops mineral in less than one hour; who have not seen, as I have seen, an entire religious community preserved by the same agent, though living in a convent where there was a lazaretto containing not less than a hundred cholera patients constantly. Let those deride who have not seen, as I have seen, many children attacked with croup cured in less than two days; who have not witnessed, as I have, more than seventy children with diphtheria cured by the use of Ethiops mineral.

If half the virtues alleged of this medicine belong to it, we shall reap great benefit from its use. It might be used as a prophylactic of typhoid fever.

It might be tested in private practice where there is danger—in typhoid epidemics—of the disease spreading through families or villages; or it could be tested in hospitals into which typhoid fever patients had been introduced.

It may prove a valuable aid to Baptisia, in preventing a disease which the latter remedy is so powerful to arrest in its incipient stage.

[No clinical experience with this drug has appeared since the last edition.—HALE.]

PULSATILLA NUTTALLIANA.

The American Pulsatilla will in time become an important remedy. I believe it will soon be almost universally used instead of the foreign species. In fact, I see no necessity for using the latter while the indigenous species grows in such abundance. You may be interested in its chemical and medical history.

The first mention of this plant in the annals of medicine was by A. W. Miller, a German pharmaceutist of Philadelphia, who introduced it to the profession in an inaugural essay presented to the Philadelphia College of Pharmacy.

In this essay the writer refers to his brother, Dr. W. H. Miller, of St. Paul, Minnesota, as having used the plant in various diseases. This physician (an allopathist) is probably the first who used it in the United States.

The author of the above-mentioned essay subjected the plant to an exhaustive chemical analysis, all of which may be quite interesting to the scientific chemist, but is not of sufficient importance to the practical physician to be herein detailed.

Mr. Miller used the flowers and herb; he does not appear to have made use of the root in any of his experiments. We do not find any reason given in his paper for rejecting the root, which, doubtless, possesses the active virtues of the plant in a high degree.

The results of Mr. Miller's experiments, which are of especial interest to us, are, namely—

1. It was found that in the process of drying the flowers lost 85 per cent. in weight, as compared with their weight in the recent state.

2. The active principles of the plant seem to be extracted thoroughly by Alcohol of the strength of 95 per cent.

3. A portion of the peculiar acrid volatile principle, which is one of the most important constituents of the plant, seems to be lost by the process of drying.

4. The same principle, termed by chemists *Anemonin*, seems to be capable of isolation from the fresh plant, but not from the dry, and is volatile at ordinary temperatures.

5. In the course of the experiments the substances extracted possessed a very acrid and almost caustic taste. When volatilized they produced a very irritating, pungent vapor, affecting the eyes and causing sneezing. Also these extracts had a well-marked "camphoraceous odor." In the analysis, grape sugar, gum, resin, an alkaloid, and Anemonic acid were found in appreciable quantities.

6. The *inorganic* constituents of the plant were found to consist of Sulphate of potassa, Carbonate of potassa, Chloride of potassium, Carbonate of lime, Magnesia, and "a protosalt of Iron."

The following *practical* deductions may be drawn from the above experiments: (*a.*) Tinctures should be made from the fresh plant, if we would retain all its medicinal constituents. (*b.*) Every precaution should be taken to prevent the escape of the *volatile* principle, which is doubtless one of the most important, especially in the treatment of irritable conditions of mucous tissues. (*c.*) In certain cases the *vapors* of this medicine may be used with advantage as a topical homœopathic remedy, especially in affections of the respiratory passages and the eyes.

Certain deductions, which may be termed *theoretical*, may not be amiss in this place. We find among the organic constituents of this plant *three* at least of our most valuable remedies, namely: Calcarea carbonica, Kali carbonicum, and Ferrum. In the introduction to Rumex crispus in this work we mentioned the presence in that plant of Sulphur, Phosphorus, and Calcarea, and suggested that certain pathogenetic symptoms produced by Rumex, and its curative powers in similar affections, may have been due to the presence of those agents. No one who has studied and used the Rumex can fail to see the close similarity in effects.

So with Pulsatilla. It is highly probable that the Pulsatilla nigricans, now in use, contains the same inorganic constituents as the American variety. Who has not noted the close similarity of many of the symptoms of Pulsatilla with that of Calcarea, Kali carbonicum, and Ferrum? It has been curative in certain intestinal and gastric derangements, in affections of the respiratory passages, and for the chlorotic conditions in which the above trio are also indicated.

The chemico-physiological portion of our school can readily accept this explanation of the curative powers of Pulsatilla. Even the believer in high dilutions may not reject the theory, for these salts are held in solution in the plant, are given up to the Alcohol, and then conveyed into the circulation of the patient in the dilutions administered.

We have not been able to obtain a chemical analysis of the European Pulsatilla, but there is doubtless such an analysis on record somewhere in the annals of pharmacy.

We are aware that a portion of our school make no account whatever of chemical analyses of plants, contending that the true and only medicinal or remedial principle is dynamic, and a unity. We shall not here discuss the question; the "golden mean" of truth doubtless involves both the dynamic and chemical theories.

Dr. W. H. Miller, of St. Paul, Minnesota, struck with the many points of similitude between this plant and the European Anemone pulsatilla, conceived the supposition that in chemical composition and therapeutical effects they were also closely allied, if not synonymous. He instituted numerous experiments with a view of verifying the latter surmise, and, according to his statements, they proved to be entirely successful. He claims to have established the value of this remedy in many chronic diseases of the eye, particularly cataract, amaurosis, and opacity of the cornea. Very decided advantage was also experienced from its employment in cutaneous eruptions and in secondary syphilis. Dr. Miller says:

> These results, in conjunction with the investigation of its chemical constituents, are sufficient to warrant its substitution for the European Anemone pulsatilla, which, though not often administered by regular practitioners, is very frequently resorted to by homœopaths.

He thus describes his method of using it:

> A tea of the dried flowers and herb was sometimes employed, as well as the juice of the fresh plant bruised and expressed, and then either preserved by the addition of one-fourth of its bulk of Alcohol, or evaporated to the consistence of an extract. In preparing the latter, the presence of some volatile acrid principle was clearly manifested by the highly irritating vapors arising from the juice on the application of gentle heat, producing a very painful impression on the eyes of the operator. As the preserved juice had not been subjected to the

deteriorating influence of evaporation, it was supposed to contain the greatest amount of active principle. It was, therefore, most frequently administered, and the most marked effects of the drug were observed to follow from its use.

The above experience coincides with that of Stoerk, who probably used the same variety afterwards proved by Hahnemann. Stoerk prescribed it successfully in amaurosis and other diseases of the eye, in secondary syphilis, and in cutaneous eruptions.

There is no sufficient reason why Jahr and other Continental homœopathists should banish the Pulsatilla vulgaris so completely from our Materia Medica, for it has been employed by various European and English physicians of the allopathic school for diseases similar to those in which the genuine Pulsatilla has been used successfully. It has even been used with good results in whooping-cough and rheumatism. From certain inquiries which have been made, we are inclined to believe that much of the Tincture of pulsatilla which is used by our school is made from the latter plant, and even from other members of the Anemone family.

Even the various species of the Anemone should not be left unnoticed. Nearly related to the Pulsatilla, they have many medicinal qualities in common. One of them, the Anemone nemoroso, or Wood Anemone, indigenous to this country and Europe, has, according to Wood, "been found a speedy cure in tinea capitis, applied externally to the head." Also, "that it is said to act as a poison to cattle, producing bloody urine and convulsions."

The history of American Pulsatilla in homœopathy is as follows: In May, 1865, I published a brief article in the "Medical Investigator," entitled, "Have we an Indigenous Aconite and Pulsatilla?" in which I gave a botanical description of the American Pulsatilla, and solicited specimens of the plant. This inquiry was responded to by Dr. Douglas, of Milwaukee, who, together with several other physicians, sent me dried and fresh specimens.

On the 15th of May, 1865, in the Illinois State Homœopathic Medical Society, as Chairman of the Committee on Materia Medica, I read a report, in which I gave a minute description of the plant, and its chemical and medical history up to that time. This

report was published in the "Investigator" for June, 1865. I also called the attention of the Western Institute of Homœopathy to this plant at its annual session in St. Louis, in May, 1865.

On the 20th of June, 1865, Dr. Burt, of Lincoln, Ill., commenced proving the plant. This proving was sent me several months after, and published, with some clinical observations, in the "United States Medical and Surgical Journal," January, 1866. A few other provings have been made and their symptoms given in Vol. I.

It has since been used by hundreds of homœopathic physicians, but the records of its use have not been published. I have, however, gathered from some of my colleagues a few clinical cases illustrative of its curative action.

The standard preparation used should be a tincture of the whole plant, made by adding to the fresh plant an equal weight of 95 per cent. Alcohol, allowing it to stand three weeks, then decant and filter, and put up in glass-stoppered bottles, and keep in a dark, cool place.

Make the dilutions with pure homœopathic Alcohol, unless such dilutions deposit a sediment, in which case add, drop by drop, distilled water until the precipitate is taken up. If it should be ascertained that a precipitate uniformly deposits upon using strong Alcohol, substitute Alcohol diluted with one-twentieth or one-tenth its bulk of distilled water. It is probable that the sediment contains some of the valuable constituents of the plant, and should for this reason be kept in solution. Of late I prefer the tincture-trituration.

The symptoms of a drug are not all that you should know of it, especially if such symptoms have been caused by provings made with the attenuations.

You should study its toxic effects, and investigate its *method* of action, both in health and disease.

I propose, therefore, to call your attention to the physiological effects of Pulsatilla.

Although physicians of the homœopathic school are very well acquainted with the symptomatology of Pulsatilla nigricans, its pathological or toxical effects are not generally understood—perhaps the least understood of any of the drugs we use.

Hahnemann, in his "Original Provings," does not mention or refer to any cases of poisoning by this plant.

Hempel, generally apt to collect cases of poisoning by drugs, does not mention any of Pulsatilla in his works.

Some of the older German writers mention some of the severe effects of this plant, but no cases of fatal poisoning.

Deitz says an overdose of Pulsatilla is apt to cause pain in the stomach, canine hunger, nausea and vomiting, slimy stools, frequent discharge of urine, profuse and offensive sweat, excessive weakness, so that the person was obliged to keep her bed; outbreak of vesicular eruption on various parts of the body, trembling of the limbs, and peculiar pains in both eyes.

Vogt says that the most marked and constant of its actions are increased flow of urine, and increased secretion of mucus from the nose and air-tubes, and of perspiration.

Sorbenheim says it acts upon the eyes and skin, mucous membranes and urinary organs in quite a specific manner.

Dierbach says it causes offensive perspirations of the feet and armpits, vesicular and pustulated eruptions, profuse flow of urine, and that suppressed piles and menses are apt to reappear under its use; it is also apt to excite an irritation to cough, repeated sneezing, headache, dizziness, pain, sensitiveness, and dimness of the eyes; also nausea, vomiting, pains in the stomach and bowels, colic and slimy diarrhœa.

English and French physicians do not give any original ideas relative to the action of Pulsatilla.

American physicians are all silent on this subject, with one notable exception, namely, the late Professor Tully, one of the best medical minds of this century in the allopathic school. His observations are suggestive, and although couched in the antiquated phraseology affected by him, are well worthy our careful study. He says:

Perhaps, the medicinal species of the genus Pulsatilla, which I believe have been reported by some to be narcotic, of a non-sedative and non-stupefying character, may, in fact, be erethistic after the manner of the Aconite. I am inclined to think they are, but I have no certain knowledge on the subject. These articles, in excessive quantities, are certainly capable of producing constitutional irritation, with jactitation; and I do not doubt, if pushed to a sufficient extent,

they would also occasion rapidly progressive exhaustion of the powers and energies of the nerves of chemical action, nutrition, and reproduction.

I imagine Dr. Tully meant to convey the idea that the Pulsatillas (also the anemones) may cause death by their erethistic (irritant) effect (primary) on the whole nervous system (the spinal cord); and cause exhaustion and general paralysis (secondary).

Homœopathic writers assert that the action of Pulsatilla is almost entirely spent on the skin and mucous membranes, causing profuse discharges of mucus and sweat, and eruptions. But these effects do not by any means include all the pathological actions of the drug.

Pulsatilla has a decided action on the fibrous tissues of the body, also on the nervous system.

The action of Pulsatilla (by which I mean to include the indigenous with the foreign species) may be thus arranged:

ON THE NERVOUS SYSTEM.

Nerves of Motion.—Pulsatilla is not a *tetanic irritant* like Nux, Ignatia, and others of this group, nor a *paralyzing sedative* like Gelseminum and its analogues. It causes a state of *erethism.* This condition does not result in spasm, tonic or clonic, *transient jactitation,* twitching, tremors, and perversions of the motions of the body being the extent of its action on the motor nerves. Both the indigenous and foreign species cause "great weakness, heaviness, and trembling of the limbs." The foreign species has cured paralysis of the lower limbs, and the indigenous species is indicated in the same condition. The *primary* action of Pulsatilla resembles the *secondary* action of the so-called "Nervines," namely, Asafœtida, Valerian, Scutellaria, and Cypripedium.

The nerves of motion are deprived of their normal tone; they become irritable, and their action perverted.

Whether Pulsatilla acts directly on the nervous centres, or indirectly, by irritating their periphery, I am not prepared to decide.

Nerves of Sensation.—These nerves are equally irritated and their functions perverted by Pulsatilla, as are the nerves of mo-

tion. We thus get abnormal sensations of heat and cold, neuralgia, hyperæsthesia, etc.

Ganglionic System.—The action of Pulsatilla on these nerves is, firstly, excessive reflex irritation, followed by a condition bordering on paralysis.

Clinical Observations.—Pulsatilla, in common with some of its analogues, has a specific power to cause those *reflex* irritations of the nervous system which we so often see in disease. It may induce nausea and vomiting by its action on the uterus; palpitation of the heart, from this and other causes; functional affections of the eyes, amaurosis, and the like, from distant irritations; vertigo, headache, toothache, paralytic sensations in the extremities, etc., all from causes remote from the *apparent* seat of the disease.

The chlorotic condition which Pulsatilla is capable of causing is not always the result of idiopathic indigestion, but oftener a debilitated and irritated condition of the nerves which govern nutrition; digestion and assimilation are thus prevented, and we have a chlorosis of a purely trophic nerve origin.

Muscular System.—Its action on this system is never direct, but only through the nerves of motion, or from a metastasis of catarrhal rheumatic poison.

Mucous System.—The Pulsatilla has a distinct and specific action on the mucous membranes, causing intense irritation, followed by more or less profuse discharges of a blennorrhagic or catarrhal nature. Its action rarely goes on to ulceration. If these discharges are prevented, or suddenly arrested, as in natural diseases, the serous and fibrous tissues take on an active inflammation. Thus, a Pulsatilla catarrh may result in a synovitis, more rarely a pleuritis, or a pseudo-rheumatic affection of the periosteum and the fibrous portions of the muscles. In the same way a Pulsatilla blennorrhœa may change its location from one portion of the mucous surface to another. A leucorrhœa may change to a conjunctivitis or bronchitis. Such is the protean and erratic character of the Pulsatilla catarrh, that it may suddenly change to a neuralgia, a chorea, an arrest of nutrition, or a swelling of some of the glands, generally the testicles or ovaries.

Glandular System.—As intimated above, Pulsatilla may affect the glands indirectly, we believe never directly.

Vascular System.—(See Fever.) Pulsatilla does not appear to affect the *heart* and *arteries* directly.

Venous System.—It causes many symptoms of venous stagnation, and has been used successfully in varicosus and other diseases of this system, but in what way it acts on these vessels I cannot say.

It causes eruptions on the back, legs, and ankles, of a dark, bluish-red color, attended through the day with more or less itching, but at night the itching is most intolerable. The eruption stands out prominently from the skin, and is from the size of a three-cent piece down to a miliary eruption. This eruption resembles measles.

It is homœopathic to *urticaria, papulæ,* or an eruption which begins as one of the former, but instead of disappearing, changes to pustules. In this respect it resembles its relatives, Clematis, Ranunculus, etc.

The observations above set forth may be found to be crude and incorrect, but in the absence of any pathological provings they are the best that I can give.

It is to be hoped the homœopathic profession will make the American Pulsatilla an exhaustive study, both by pathogenetic (symptomatic) and pathological (toxical) experiments, in such a thorough manner as to arrive at its real sphere of action.

Skin.—Its action on the cutaneous surface is as specific as its action on mucous surfaces.

It has one head-symptom, almost identical with one found in the pathogenesis of *Pulsatilla nigricans,* viz., "Headache arising from the nape of the neck and upwards." The headaches of *Puls. nutt.* would seem to be both rheumatic and gastric, taking the form of hemicrania, "clavus hystericus," or from indigestion, in all of which it may prove useful. I have used this remedy in three cases of headache, one of which was cured by it. It was that of a lady in the country, whose case was described to me by the husband as "sick-headache," commencing in the middle of the day, with intense pain in one side of the head and one eye, accompanied by chilliness, lowness of spirits, and finally vomiting. The vomiting usually relieved the pain, after which she could go to sleep. Those paroxysms had occurred, usually, twice a week for

several years. She took five drops of the 2d dilution three times a day, for four weeks. After commencing the medicine, she had but two attacks of headache, the last paroxysm very light. It is now three months, and there has been no headache of any severity since.

The eye-symptoms are very decided. I have had better success with it than with its European relative in *conjunctivitis, hordeolum*, and swelling of the edges of the lid (*ophthalmia tarsi*). There is a peculiar inflammation of the eye, occurring in persons of blonde complexions, light hair and blue eyes, brought on by taking cold. (I have not observed it in brunettes.) The eyelids are puffed, almost like œdema, and with the surrounding skin assume a livid, light-purple hue. This affection comes suddenly, and after lasting a day or two a profuse mucous secretion sets in from the conjunctiva, followed by improvement more or less rapid. In scrofulous subjects it often degenerates into a chronic state, accompanied by pustules and granulations. This Pulsatilla is specific for the disorder, and will hasten the favorable termination and prevent a chronic condition. Dr. Miller, of St. Paul, writes that he has cured several cases of opacity of the cornea of long standing, in which the loss of sight was nearly complete. He used a decoction of the plant, but does not mention the dose, but says "two fluid ounces were used in two weeks." The provings would indicate its usefulness in *catarrhal* and neuralgic affections of the eyes.

I have known the most happy results follow its use in catarrhal *otitis* and *otorrhœa*.

In *catarrhal angina*, when the fauces and pharynx, as far as can be seen, are of a purplish or livid color, puffy, and the seat of stinging pains. Its throat-symptoms somewhat resemble those of Hamamelis and Gymnocladus, and the first stage of the Apis angina.

In *cough* it acts as well as the other species.

In gastro-enteric disorders, such as *dyspepsia, indigestion, diarrhœa, colic*, and *vomiting*, I find it acts very promptly.

The same may be said of its action on the urinary and genital organs.

I do not believe there is any difference in the *quality* of action

of the indigenous and foreign species of Pulsatilla, but I believe the *quantity* differs, *i. e.*, the former is a much more powerful plant, and affects the organism more profoundly.

As intimated, when speaking of the *action* of Pulsatilla, I believe we would be more successful with this remedy if we thoroughly understood its *method* of action. From a careful study of it, I believe the keynote of its action is its power to cause catarrhal affections with peculiar concomitants, namely, neuralgic or rheumatic pains preceding catarrhal discharges, or following upon their suppression; and inflammation of glandular structures resulting from suppressed catarrh.

Pulsatilla catarrhs result in *leucorrhœa* (*vaginal* and *uterine*), and even *ovaritis*, *mucous metritis*, and *mucous cervicitis*. The *amenorrhœa* of Pulsatilla generally results from a suppressed catarrh; also the *delaying menses*, which are generally painful and scanty.

In the provings we find that it causes sharp pains in the uterus, from side to side, accompanied with chilliness, trembling weakness of the legs, urging to urinate, and diarrhœa. "Menses more regular since proving the drug."

Dr. Miller (allopath) writes that he has used it successfully in leucorrhœa and irregular menstruation. I have sent the tincture to many of my colleagues requesting them to use it in uterine diseases. The general testimony is that it acts more promptly than the European species.

In *retention of the menses* from a cold, or other incidental causes, and in recent cases, the Pulsatilla nuttalliana has proved curative in many instances.

The following case was published, with the original proving, and the experience of several physicians has since confirmed its clinical value:

CASE I.—A young lady, on a visit to this city from Boston, who had previously been subjected to retardation of the menses, postponing three or four weeks beyond their usual time, applied to me for relief from the following symptoms:

Constant chilliness, coldness of the hands and feet, loss of appetite, sour eructations, nausea after meals, hemicrania, toothache, melancholy, and general malaise. The menses were retarded two weeks beyond their normal time. She said the precursory symptoms of menstruation occurred while on her way

to this city, at which time she caught a severe cold. No menstrual symptoms now.

This was a case in which any physician of our school would have prescribed the European Pulsatilla. I thought it a good opportunity to try the American plant. Thirty drops of the first dilution were mixed with half a glass of water, a spoonful to be taken every two hours. After the fourth dose the menses appeared without the usual pains, and with a permanent disappearance of all the constitutional symptoms. I think this may fairly be set down as a curative effect of *Pulsatilla nuttalliana.*

Since the above was published I have used it in several cases, only one of which I shall narrate, as it is similar to the rest. In some cases of *amenorrhœa* it has failed, and the menses had to be brought on with Senecio and Sabina.

CASE II.—A young woman, usually healthy, plethoric, had the menses delay two weeks. Symptoms: Severe headache all the time; a heaviness and fulness, aggravated by movement or stooping; dimness of sight, increasing to blindness when stooping or rising suddenly; sensation of weight in the uterine region, with considerable aching pain extending to the back, very severe at times, especially in the evening; hands and feet cold; weakness in the lower extremities.

Cimicifuga was given a few days, but no improvement followed its use. Pulsatilla nuttalliana was given, five drops of the one-tenth every three hours. Improvement commenced the *next day*, and the menses came profusely, but without the uterine pain, about two days before the expiration of the eighth week. In this case a higher dilution would probably have acted better.

Dr. A. E. Small reports the two following cases of *acute amenorrhœa* in which this remedy seemed to act in a very prompt and powerful manner:

CASE I.—A stout, middle-aged married woman had the menses delayed five days. This was so unusual that she applied for medicine to bring them on. No symptoms were complained of. Pulsatillana nuttalliana was prescribed, ten drops of the tincture in half a glass of water, a spoonful every hour. After the sixth dose the menses came on profusely but without pain.

CASE II.—An unmarried woman, aged 18; menses had delayed three weeks beyond their usual normal period. Pulsatilla nuttalliana, given as in Case I, brought on the menses after the tenth dose.

A physician informed me that he gave the Pulsatilla nuttalliana to a stout, healthy woman, aged 35, who applied to him for a retardation of the menses, ten days past the natural time, no unpleasant symptoms resulting. Five drops of the mother tincture

every three hours brought on the menses, after the fifth dose, with "*headache, nausea,* and *diarrhœa.*"

The action of Pulsatilla on the muscular and fibrous tissues is well known, but its use in *rheumatism* is not sufficiently appreciated or understood. It is of no use in idiopathic rheumatism, but is specific for that variety which is relieved by a catarrhal discharge or follows the suppression of a catarrh. The pains are generally flying, wandering, and rarely fixed, except on the dorsum of the feet.

Since I have prescribed the Pulsatilla according to this indication, the most excellent results have followed its use. I give the lowest dilutions or the matrix tincture, repeated until decided improvement sets in. I have known it to cause the reappearance of an intestinal or vaginal catarrh after they had been absent weeks and had caused the severest rheumatic neuralgias.

The following symptoms are especially noteworthy:

Frequent flying pains in the wrists and fingers, during the whole proving.

Hard drawing pains from the first to the second joint of the right middle finger.

Stiffness of the fingers.

Drawing pains in the left metacarpal bones.

Hands hot and dry—constant symptom.

Sharp, neuralgic pains passing from the hip-joint down to the middle of the thigh, along the course of the ischiatic nerve.

Severe, dull pains in the right knee-joint, for two hours in the morning, while in bed, during a rainstorm.

Sharp, drawing pains along the outside of the left knee, passing half-way down the leg.

At noon began to feel great weakness in the legs, could scarcely stand, and walking became difficult; it was a "trembling weakness," with a sensation of great *weariness* and *heaviness.*

It cured the following case of *rheumatismus fugax:*

A strong, healthy-looking man applied for relief from wandering rheumatic pains, principally located in the dorsum of the right foot, and in the loins, thighs, chest, arms, and head. The pain in the head was a dull, heavy pressure in the vertex, nearly constant, with occasional sharp pains. Some febrile disturbances, but no local inflammatory action in the joints or muscular tissues. The urine was scanty and deposited lithates. There was acidity of the stomach; bowels normal; appetite good. After other remedies had been tried for a week, Pulsatilla nuttalliana $\frac{1}{1^6}$ was given, and removed all the symptoms in three days.

Another, but a little different attack occurred a few months after, and was removed again by the same remedy.

I have found it useful in *melancholy, sleeplessness,* and extreme nervousness in women and children.

My advice is to use it for all the ailments for which the European species is recommended.

I carry in my case the two species side by side, in the 2x dilution. I am favorably impressed with the action of the triturations made from the mother tincture of the fresh plant, not triturated long enough to dissipate the volatile principle (ten minutes is ample time).

PTELEA TRIFOLIATA.

None of the new indigenous medicines were more thoroughly proven than this; but for some unaccountable reason it has been but little used, except by the original provers and myself.

If there is any clinical experience on record, it has not come under my observation.

It is a powerful remedy, not violent in its action, like Podophyllum or Iris, but slow, pervading, and possessing the power of causing many chronic abnormal conditions.

It is an analogue of Bryonia, Nux vomica, Arnica, and Hydrastis, and has some affinities with Ruta, Myrica, Sulphuric acid, and Turpentine.

Dr. Tom. Nichol, of Montreal, one of the provers, values it very highly in *hepatic difficulties* and those *erysipelatous and urticarious eruptions* so often concomitant with affections of the liver.

It must exert some profoundly injurious effect on the blood, for it causes a condition similar to *purpura.*

I have found it useful in *bilious headache, dyspepsia, gastralgia, congestion of the liver, chronic hepatitis,* and *chronic erysipelas.*

It has been recommended for *chronic rheumatism, dysentery,* and *constipation.*

Some English critic intimated that it had been a waste of time to prove Ptelea. He certainly could not have used it in practice, or he would not have made such an absurd assertion.

So highly is this medicine valued in eclectic practice, in *indi-*

gestion and *gastric debility*, that a preparation called "Elixir of Wafer Ash and Pepsin," is very popular with that school.

Dr. Farrington has compared Ptelea with Nux, Bryonia, and Arnica, giving us, at a glance, their differences:

Ptelea trifoliata has many symptoms in common with Bry. and Nux vom. All have weak mind, with bodily languor; peevish, irritable; senses too easily impressed by external objects, hence, worse from noise, light, smells, conversation, smell of food, etc. Gastric headache; stomacace; pharyngitis; disgust for meat; hepatic congestion and hepatitis; ascites (except perhaps Nux); dysenteric stool; constipation, with hard, dry stool; jaundice; catamenia too soon; urine red, high-colored; red sediment (except Bry.); stitches in various parts, worse moving, speaking, breathing; headache, with cough; rheumatism, wandering pains; nettlerash, with gastric disorder; languor, must lie down; limbs weak, with nausea, etc.

Ptelea stands between Bry. and Nux v. and Arn., in gastro-bilious diseases. Like Bry., it has hepatitis, better lying on *right* side; but the stitch pains do not appear with the least attempt to breathe, only in *deep* inspiration; and the stool is dry, hard, small, while Bry. has stool *large*, dry. Nux v. is worse lying on painful side, and has large stool.

With Arnica, it has eructations like rotten eggs, aversion to meat and longing for acids; but eating causes epigastric pain and sensation of goneness, not fulness, as in Arn.

Nux vomica has a similar periodic aggravation of gastric symptoms (3–4 A.M.); but Ptelea has aversion to fat; Nux a longing. Ptelea, predominating bitter taste; Nux, more sour taste. Ptelea, feels the effect of food at once; Nux, an hour or two after a meal. (Duodenal digestion.)

Ptelea causes dysenteric tenesmus, appearing before and *after* stool; in Nux, tenesmus ceases after stool. Ptelea, stool small, hard balls; Nux and Bry., stools too large.

I will add that the oily constituent of Ptelea has many resemblances to Turpentine, and I predict it will prove valuable in typhoid fever (tympanites), and renal diseases (morbus Brightii). It also resembles, in its action on the blood, Phosphorus, Sulph. acid, and Arsenicum.

PICRIC ACID.

Owing to an oversight, the characteristic symptoms of this drug were not incorporated in Vol. I. I therefore give them here. The following symptoms are selected from the provings

reported by Dr. L. B. Couch, for which he was awarded the gold medal by Professor Allen, of the New York College, in the spring of 1874.

Picric acid, also called Carbazotic acid, Welter's Bitter, Nitrophenisic acid, Nitrophenolic acid, is the product of the action of Nitric acid upon Coumarin, Indigo, Salicin, Carbolic acid, Oil of gaultheria, and several other substances, aided by heat. It forms in whitish-yellow prisms, with rectangular bases, which in thin layers are almost colorless. It reddens vegetable blues, and has an exceedingly bitter taste. It is fusible and volatile, and burns with a yellow flame, leaving a residue of charcoal. It is nearly insoluble in cold water, but soluble in hot water, Alcohol, or Ether.

Head.

Heavy, throbbing pains in the head, extending from behind the ears forward to the supraorbital notch, thence downward to the eye.

All head-pains relieved by bandaging tightly.

Heavy pain in occipital region, extending down the neck and spine.

Heat and congestion of the head, with bleeding at the nose.

Severe, sharp, intermitting pains in the left temple.

Full, pressive sensation in the head, from within outward.

Pains in the head, aggravated from motion.

Eyes.

Burning, throbbing pains, with dilated pupils, conjunctivitis, and lachrymation.

Everything seems blurred, as if looking through a fog, or a thick veil.

Can read only with the book about five inches from the nose.

Great heaviness of the lids; can't keep them open.

Eyeballs sore to the touch, with photophobia.

Severe, sharp shooting pains in centre of eye, extending back to occipital region—seems to follow the course of the optic nerve.

Lids sore, and slightly swollen.

Mouth, Throat, and Ears.

Ears burn, look puffy, with sensation as of worms crawling on them.

Bitter taste in the mouth.

Throat feels raw, scraped, stiff, and hot, as if burnt.

Collection of thick, white mucus on the tonsils.

Great difficulty of swallowing; sensation as if the throat would split open.

Dry cough, as from dust in the throat, followed by nausea.

Stomach.

Nausea, bitter eructations after breakfast; sensation as of something in lower portion of œsophagus.

No appetite; bitter taste in mouth; aversion to food.

Abdomen and Stool.

Stools light-colored, and passed with much burning and smarting in the anus.

Scanty, soft stools, with burning at the anus.

Crawling, stinging pain in the abdomen.

Rectum and Anus.

Smarting, stinging burning of the anus after a passage from the bowels.

Urinary Organs.

Urine profuse, very hot when passed; urethra feels as if burnt.

Urine dark, high-colored, sp. gr. 10.25 to 10.28.

Generative Organs.

Great sexual desire, and painful erections, with emissions.

Lewd dreams, with emissions.

Very hard erections; terrible erections.

Erections, with severe pain in the left testicle, as if bruised, extending up the cord as far as the external abdominal ring.

Chest.

Heavy, throbbing pain under tenth and eleventh ribs on left side.

Dull, stunning pain in the chest.

Back.

Heavy, throbbing pain in the region of the kidneys, extending down the legs, especially the left.

Small of the back sensitive to pressure.

Extremities.

Legs feel heavy, and very weak.

Legs below the knees feel very sore and tender to the touch.

Severe pain in the anterior portion of legs when touched.

Legs heavy, like lead.

Great coldness of the feet.

Great heaviness in the *arms* and *legs*, especially on exertion.

Shooting pain in the left arm, at elbow.

Skin.

Small, painful, reddish elevations, like furuncles, around the mouth and face; when opened they exude a thin, clear serum, which soon dries into a transparent scab; they then become pustular and very painful, and contain a thick, opaque pus.

Fever.

Great thirst for cold water; drank in large quantities, without relief.

Fever; great chilliness; can't get warm; followed by cold, clammy sweat; chilliness predominates; pulse 50, weak and small.

Sleep.

Sleep sound, but unrefreshing.

Restlessness.

Generalities.

Throbbing and jerking of the muscles in the different parts of the body, with severe chills and great pain between the hips.

Profuse cold, clammy sweats, with great chilliness.

Very tired on going upstairs.

General lassitude.

Rheumatic stitches in different parts of the body, with *great muscular weakness.*

Drs. Moffat and Grace-Calvert mention the following properties and uses of Picric acid (in allopathic practice):

It is tonic and astringent, the latter influence being effected by improving the general tone of the system. It has been efficaciously used in convalescence from acute diseases, cephalalgia, chronic diarrhœa, gastric irritability, dyspepsia, anæmia, and intermittent fever, in which last disease it is considered a valuable substitute for Quinia. As the free acid is apt to occasion cramps in the stomach, the Carbazotate of ammonia and Iron have been found the best. The Carbazotate of ammonia and Gallic acid, one grain each, with one-sixth of a grain of Opium for a dose, and repeated three times a day, in obstinate diarrhœa. By the use of these agents the skin and conjunctiva become colored, so as closely to resemble jaundice, and would deceive the keenest observer. The acid has been detected in the urine, even when this has been kept several days. The dose of these is from half a grain to a grain, repeated three times a day.

Since the last edition of this work, I (Hale) have prescribed this *acid* a good deal, and while I have found it useful in some cerebro-spinal neuralgiæ, with evident brain-fag, I have been disappointed in its usefulness in the class of disorders mentioned in the following paper by Dr. Jones. Since his article appeared, it has been ascertained that he based much of his theoretical recommendations on data which have been proven by Dr. Couch to be false and illusory. I have found the Picrate of Ammonia to be much more efficient in all cases than the acid. I retain, however, a portion of Dr. Jones's paper.

Grauvogl's doctrine of the "constitutions" commends itself to the practitioner because it affords such a classification of a remedy, and is to some extent expressive of the pathological nature of its action. Guided by his data, I shall first endeavor to determine what "constitution" is induced by Picric acid.

Hasty observation will lead one to class this drug in the hydrogenoid group. At first I fell into this mistake; but a little "reading between the lines" will enable one to assign this remedy to its proper place.

Great chilliness, can't get warm, followed by cold, clammy sweat; chilliness predominates, are certainly symptoms suggestive of the hydrogenoid constitution. Besides this, I have known the *wet-weather pains* of a patient with locomotor ataxy to be markedly relieved by Picric acid. And, farther, in a case wherein my friend Dr. Lilienthal gave this remedy, it induced a sensation of freezing coldness; each successive dose being complained of on this account. However, with our remedy, all these phenomena are pseudo-hydrogenoid.

In the animals poisoned with Picric acid, the blood was black and fluid; a condition which suggests a privation of oxygen.

In the symptoms of the human provers we find ample evidence of congestion;

a perversion of nutrition, wherein the balance between waste and repair is disturbed, and which tends toward incomplete oxidation of the blood.

Our "homœopathic" habit of differentiating also assists in assigning Picric acid to its proper constitution group, for we find the remedy to be characterized by an *aggravation from motion;* motion meaning tissue disintegration, accelerated histolysis, and blood still farther charged with effete material.

We observe, also, an *amelioration from rest;* the quietude reducing tissue change to a minimum, and thereby economizing the oxygen. And, still farther, we must note the *amelioration from cold* (air and water); the temperature aiding the embarrassed circulation by the tonic effect of *cold* upon the vasomotor system.

From such considerations I am led to regard Picric acid as belonging to the carbo-nitrogenoid group; but that it may be only thus classified, I am not prepared to assert, remembering that, at least curatively, Nux vomica, 3d and 30th, is respectively a hydrogenoid and a carbo-nitrogenoid remedy.

I can but regard deranged innervation as the first link in the chain of the action of Picric acid, when I remember that the best of the several provings was made with the 30th potency—a proving in which the symptoms are well marked, the modalities clearly evinced, and the *tout ensemble* stamped as genuine by the parallelisms educed from other provers, with other potencies, even as low as the first.

When we survey the whole action of Picric acid, and take in its subtlety, observing how comparatively soon such insignificant doses undermine the organism and sap its strength, we cannot avoid the conclusion that the derangement of innervation occurs in a highly vital territory. In the proving to which we have just referred, the first symptom produced by the drug is: "*Ears began to burn and look puffy, with a sensation as if worms were crawling on them. These symptoms lasted two hours.*" Schröder Van der Kolk says redness of the ears indicates congestion of the posterior half of the base of the brain; and you may depend upon it, if the prover had completed the record, "*redness of the ears*" would also have been noted; for pathology can supply a prover's omissions. Van der Kolk also gives redness of the nose as an indication of congestion of the anterior half of the base of the brain; and the second prover, in three hours after the first dose, notes "*bleeding of the nose, with heat and congestion of the head.*" Evidently the first act of this pathogenetic drama is cerebral congestion.

Where is its location, or rather, where is the congestion specializing itself by *effect?* The "*sensation as if worms were crawling on the ears*" signifies something amiss in the pons varolii.

If still further evidence is needed that cerebral congestion is the pathological status, we find it in the sleep symptoms. In a brief proving on myself, an inability to fall asleep until long past my usual time was a disagreeable feature; and from Durham and Hammond we learn that sleep requires cerebral anæmia; that a certain degree of cerebral congestion gives insomnia; that an intense degree is coma.

As it is not my purpose, on this occasion, to specialize the symptomatology of this remedy, I turn at once to the post-mortem record of the poisoned animals.

In the cat were found the following conditions: "*Membranes of the brain gave no evidence of inflammation; cerebrum slightly softened; the cerebellum, medulla oblongata, and upper part of the cord were soft, pulpy, and apparently completely disorganized; in the lower portions of the cord no lesions were discovered.*" In the dog, "*the cortical substance of the cerebrum, the whole of the cerebellum and of the medulla oblongata, and a portion of the cord were apparently completely disorganized.*"

I regret to say that these "apparently disorganized" structures were not submitted to an unquestionable microscopical examination, and, as a result, we are embarrassed in the attempt to read the riddle of the physiological action of this agent.

By classifying Picric acid with the carbo-nitrogenoid group, we are placing it among the agents which most especially devitalize.

We do not find in its action any of that destructive energy, that true erethism, which characterizes the oxygenoids, and we need only exercise a little circumspection to avoid mistaking the indolence of the hydrogenoid for the languor of the carbo-nitrogenoid.

The condition of the blood also tends to confirm this classification. It is "*black and fluid,*" and we are aided in properly estimating this by the following symptom which was observed on the dog: "*Profuse frothy saliva hanging in long strings to the ground.*" We are reminded of Kali bichromicum and its stringy mucus; and when we recollect Babington's experiments on the effects of alkalies on albuminous fluids, and know that Liquor potassæ transforms laudable pus into a transparent, tenacious, and stringy plasm or mucus, we are led to regard this *black and fluid blood* as a blood in which some alkali is in excess; as it is in the blood of enteric fever, of diphtheria, and of all (?) diseases characterized by adynamia.

With such a blood-condition we are prepared to appreciate the significance of the symptom, "*pulse* 50, *weak and small.*" When to this blood-condition we add the structural degeneration in the brain, medulla oblongata, and upper part of the cord, we easily perceive why it is that the pathogenetic genius of Picric acid —its prostrating power—is so readily discerned, and we can but be struck by the correspondence between its symptomatology and its pathological anatomy.

In a slow poisoning with Picric acid, the victim appears as smitten by a blight *ab initio*. A languor steals over the whole organism, gradually deepens into torpor, and makes it more and more difficult to arouse the waning energy, until, like an exhausted lamp, the last faint, flickering spark trembles and is gone. This torpor at first dulls, and finally extinguishes the intellect; coetaneously the motor function is impaired—weariness, profound debility, complete inertia being the grade and order of its progress. In brief, a universal prostration, psychical and physical, is the distinguishing feature, and *speedy exhaustion from slight exertion* the grand characteristic of this remedy. One single word portrays the generic action of Picric acid: *Asthenia.*

The intense excitement of the genital apparatus, as evinced by violent and long-continued priapism and profuse seminal emissions, will not suggest the exuberance of lusty vigor to him who is aware that such evidences of *quasi* strength in that department of the economy are the best proof of weakness—of a specific debility, and of which, if the cause be not removed, the sequel is cardiac hypertrophy, consumption, or insanity, and the end premature death.

All drugs in their action induce disease, pervert function, and derange structure, but *the* feature of the action of Picric acid with which I am most impressed is that, beside bringing such discomfort as attends all drug-action, it initiates a profound derangement from the very beginning of its operation—it seems to be in deadly earnest from the very first.

The incompleteness of the pathogenesis which we now possess, will not enable such a differential study of this remedy as the proper exercise of our art demands. And indeed such a study, if we had the necessary material, is "for other hands than mine."

I trust, however, that I may presume to offer you a contrast by which the prime feature of this remedy will be fastened in the memory.

Both Picric acid and Silicia are signalized by a condition which is best expressed in the incisive vernacular of the street as "played out." A fragmentary citation from Marshall Hall will enable us by this "played out" feeling to fix the location of the action of these two remedies. This great physiologist says: "Another function of the cerebral system is the sense of *fatigue*. . . . . As the true spinal system does not sleep, so it is incapable of fatigue."*

In the Silicia patient this "played out" feeling is very marked, but he can *become interested*, and then he works with both mind and body as well as ever; in fact he will outdo those who are working with him—the very continuance of effort which seems to exhaust them appearing as if it only reinforced him; therefore, we may say of the Silicia patient that *while at work* he is not only unconscious of any inability, but by a seemingly awakened ardor irresistibly impelled into a paroxysm of overdoing.†

From a short proving of Picric acid on myself, I learned to recognize the difference between these remedies. While under the influence of the drug, I was copying from a volume before me, and when upon the fifth sheet of manuscript I found that after reading a line in the book I could not remember it long enough to write it down; two words of three syllables seemed about all that my memory could carry, so that I was constantly obliged to be recurring to the printed page. I am so accustomed to transcribing, that I can ordinarily retain two or three lines of type; indeed, I did this when I began work on this very occasion. Now, I had previously observed, as an effect of Picric acid, that a walk, which ordinarily I would make no account of, produced a great weariness in the lower extremities, and I had jotted down, *soon wearied by slight exertion*, as a feature of the action of this drug. From this last experience, then, I learned that the same modality is as true of the mind as of the body. Then, the contrast is this: the prostration of Silicia comes only after the endeavor has been made; that of Picric acid supervenes while the endeavor is being made. The Silicia patient resembles a thoroughbred who runs the race, wins it, and then dies in the stable. The Picric

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* On the Diseases and Derangements of the Nervous System, p. 26.

† For a knowledge of this "inside history" of Silicia—a knowledge which I should never have obtained from the pathogenesis of this remedy—I am indebted to Dr. Carroll Dunham. I have so often shared in the fruits of his discriminating insight, that my many obligations would be burdensome did I not know that from his fulness he can enrich others without impoverishing himself.

acid patient is like a low-bred cob who falls and dies upon the track. These are by no means mere figures of rhetoric; on the contrary, they recognize a pathological fact which is the essence of the difference between these remedies, namely, the action of Picric acid is to extinguish that quality which we call *grit*, while Silicia leaves it intact.

As we have employed figures to illustrate a contrast which may aid us in selecting either of these drugs as a remedy, nevertheless, as physicians, we must attempt to determine the physiological import of the idea which is clothed in those figures.

We may then ask, what is the physiological meaning of *grit?* In the sense in which we employed that word it is matter obeying mind, or, if you will, volition compelling function. The will is a stimulus which excites the irritability of a neurine cell in thought, and of a muscular fibre cell in motion.

Now, can we say that Picric acid acts directly on the will, enfeebling it? If I did say this, Samuel Lilienthal, M.D., Professor of Psychological Medicine, would not let me share his office another hour.

When I was copying from the book before mentioned, I had a good will to have finished my task at one sitting; but when I willed my memory to retain a line at a time of the printed page, the brain-cells had become so fagged that one or two words made a faint impress, and the rest faded. The stimulus of the will was of little avail, because the organs on which it sought to act had lost their irritability—they no longer responded, or only feebly responded to the stimulus.

Evidently, then, the ultimate pathological difference is that Picric acid exhausts the irritability. The profound sense of fatigue in Picric acid is genuine debility; the sense of prostration in Silicia is a delusion.

Said Dr. Dunham to me once: "The Silicia patient *feels* as if he could not possibly do this or that, but when urged to the doing, he goes off in a spasm of overdoing." Writer's cramp affords a good instance of this Silicia condition, and in such overdoing, we see wasted strength—a prodigality of doing—rather than waning strength and inability to do.

Silicia exalts and intensifies the normal irritability; Picric acid depresses and extinguishes it.

Because we have spoken of the action of Picric acid on nervous tissue especially, do not receive the impression that this is its only sphere. From its action on brain, medulla oblongata, and spinal cord, we must deem it capable of secondarily inducing universal havoc. *The type of its secondary action will be that of deranged nutrition.*

By its action on the encephalic mass, the inhibitory nerve of the heart is stimulated, so that a young man under the influence of this remedy records a pulse of only 50, weak and small; but when we ascribe this to the cardiac inhibitory, how do we know that the general adynamia is not paralyzing the accelerator nerve, or the ganglia, whose ramifications envelop the auricles and ventricles?

I cannot close without a word about the wasted muscles of the inferior extremities which were found in the poisoned dog.

Of the nature of the pathological change in them, we unfortunately know nothing; but the significance of the naked fact must not be overlooked so long as nosology recognizes a progressive muscular atrophy.

PICRATE OF AMMONIA.*

Several years ago a fragmentary proving of Picric acid was presented to the homœopathic school. It had some very prominent and characteristic symptoms, mainly of the head, which led me to think it would prove a very useful remedy. But, notwithstanding an extensive theoretical analysis of its symptoms by one whom our school then supposed to be a man of science, the use of Picric acid has not justified the deductions and therapeutic indications based on the aforesaid analysis. The history of the use of this *acid* is somewhat similar to that of Bromine. Bromine has some very suggestive cerebral symptoms, but it was never used with any success as a curative agent in cerebral affections. But when its acid was united with alkalies, forming Bromides, those salts at once took high rank in diseases of the brain and nerve-centres. So I predict it will be with Picric acid, that the picrates will prove more useful than the *acid.*

The study of the provings of Picric acid and the cases of poisoning from the picrates, apparently indicate that the primary effects are to cause *congestion of the brain and spinal cord.* This congestion is not of an active sthenic character like that caused by Glonoin and Belladonna, but of an asthenic or passive nature. Concomitant with this asthenic congestion it inaugurates an injurious effect on the red corpuscles of the blood, so that when the *secondary* effects appear they take the form of cerebrasthenia and neurasthenia, with general (pernicious) anæmia. Acting upon this theory, I have used the Picrate of ammonia for several years in a class of diseases, ranged under a nomenclature now quite popular, having names such as mentioned above.

I will briefly mention the disorders in which I have found it efficient: (1.) In passive congestion or stasis of the brain, especially the medulla and cerebellum and cerebro-spinal centres, especially when due to dissipation, exhaustion from mental or physical labor, or both combined. The special symptoms indicating its use are, heavy pressive pains in the back of the head and neck (occiput and mastoid region), and also on the sides of the head to the temples

* Written for the Illinois State Homœopathic Medical Society, 1879.

and eyes. The face is somewhat flushed, a dark, dusky color, and some unnatural heat in the head. The mind is obtuse, heavy, and indisposed to mental labor, and the whole body is in the same condition. The heaviness of the legs is quite noticeable, as is also the peculiar abnormal turgescence and irritation of the sexual organs. It may even be indicated in some of the primary stages of "*cerebro-spinal fever*," so-called. Not only in acute attacks, having the above symptoms, but in many cases of chronic headache have I found it curative. The *dose* I have found most efficient for these symptoms and condition ranges from the 6th to 10th of Picric acid, and the 3d to 6th of Picrate of ammonia. Larger doses might aggravate, because these are *primary* symptoms. (2.) In *cerebrasthenia, neurasthenia,* and *anæmia,* with profound asthenia and semi-paralysis or paresis of the whole physical and mental organism, with symptoms somewhat resembling its primary ones, but *conditions* widely different. Picric acid and the picrates are among our most valuable medicines. Among the most characteristic symptoms of cerebrasthenia are: Headache and confusion of mind from intellectual effort; stupid, heavy slumber, which does not refresh; also headaches from going into public meetings, from going shopping, or on a journey. All these symptoms and the condition itself are readily removed by the use of Picrate of ammonia in doses of the $\frac{1}{100}$th of a grain, four times a day, for weeks. I have never seen any unpleasant effects from its continued use.

In headache having a kind of periodicity this remedy acts very satisfactorily. Bilious, nervous, and even gastric headaches are apt to recur every four, seven, or fourteen days, and often once a month in women, just before or after the menses. Unless some other remedy is specially indicated I have lately prescribed Picrate of ammonia, and with very happy results. The symptoms which yield to its administration are quite similar to those of Sanguinaria, Cimicifuga, Chelidonium, Solanum, and even Pulsatilla. If, with the headaches I have mentioned, we find *chlorosis* or anæmia, the Picrate of iron can be substituted for the Ammonium salt with great advantage.

Several years ago the Picrate of ammonia was praised for its antiperiodic power in the treatment of malarious intermittent fevers. But it was used so indiscriminately by the old school that

not coming up to their expectations it has been abandoned by them. There are, however, many allopaths who pronounce it excellent in a certain class of old intermittents, probably those which have been maltreated with Quinine, and have a Quinine cachexia ingrafted upon the malarial. The picrates, like Arnica and Sulphur, are among our best antidotes of the Quinine cachexia, and they also correspond closely to the profound neurasthenia and anæmia caused by chronic malarial poisoning. During my residence in a malarial district, many years ago, I saw many cases which, were I to meet them now, I should treat with the Picrate of ammonia, and expect to cure them.

Among the protean forms of chronic ague are the periodic headaches, which strongly resemble those which the picrates cure. In some foreign journals I have seen mention of the alleged good effects of this drug in *diphtheria*. It was used internally and topically as a gargle. A study of the symptoms of Picric acid show considerable resemblance between some of the initial symptoms of diphtheria and that poison. Its profoundly prostrating effect on the nerve-centres remind one of those nervous lesions which often follow diphtheritic diseases.

It has been used successfully in whooping-cough. Last winter I cured several obstinate and distressing cases, both in adults and children. The treatment of whooping-cough has not covered homœopathy with glory, notwithstanding Dunham's excellent monograph. I am sorry to say I have never seen any brilliant curative results from remedies selected after his plan, any more than from remedies selected from Bœnninghausen's plan in the treatment of ague.

In some of the above cases of pertussis I gave *disks* moistened with Picrate of ammonia with results which surprised me. The paroxysms grew less in violence and in the frequency of recurrence, and in a few days disappeared nearly altogether. Before closing I will mention a method of administration of this salt which is superior to ordinary methods. It has such an intense bitter taste, so pungent and persistent, that even in the third attenuation it is quite repulsive to most patients.

The manufactured sugar-coated pilules are very eligible when

we wish to give it in doses of one-fourth, one-half, or one grain, as is sometimes required in chronic agues. But in most cases these doses are too large. The triturations are the worst form in which we can prescribe it, unless we use as high as 3^{e} and upward. The mother tincture should be made by adding one drachm of the salt to an ounce of pure Alcohol. It will not take up all that quantity, but we have a definite saturated tincture of about one-fiftieth of a grain to each drop. This should be run up to the third or sixth. My favorite preparation is the tincture for adults and the 1^{x} for children. For the administration of the tincture I prefer the *disk*, a delicate lozenge composed of Sugar of milk and Albumen. They are insoluble in pure Alcohol, and each will contain just about two drops of liquid. Ordinary pellets answer very well as vehicles for the higher dilutions. In illustration of the action of this drug in some obscure disorders of the cerebro-spinal centres, it may be of value to mention a few cases treated with it.

CASE I.—A middle-aged woman, short, stout, and florid, troubled with acne and retarded menstruation, had been treated unsuccessfully for years for a kind of *sick headache* presenting the following symptoms: Every six or eight days she would wake in the morning with a violent pain in the occipital region, heaviness of the head, and vertigo when rising. This pain increased on getting up, and it extended over the sides of the head to the temples and eyes. In the afternoon nausea and vomiting of sour bilious matters occurred. Sepia, Iris, Sang., Nux and Bryonia had been tried with but little relief. I prescribed *disks*, saturated with the tincture of Picrate of ammonia, one every six hours, and every two hours during the pain. In six weeks she reported only one attack of headache during that time, and that a mild one. Several similar cases have since been treated successfully in the same manner.

CASE II.—A physician in Wisconsin applied to me for a supposed affection of the heart. On physical examination I found no abnormal conditions, except a feeble impulse and occasional intermission. The history of the case was peculiar. Several years before I saw him his horse ran away, throwing him out of his carriage, when he received a blow on the back of his head. He was also badly frightened, but his injury was not severe enough to prevent his repairing his carriage and driving home. But he observed in a few days that on turning over in bed, or stooping, or any sudden motion, he would be seized with a "wild feeling" in the occiput, a trembling beating of the heart, with intermittent action, great alarm, and anxiety of mind. He became very melancholy and thought he could not live long. He had been treated by several of our school without benefit. I at first gave him Arnica and Aconite, each in the 3d, and afterward in the 30th. I also tried Nux, Conium, and Digitalis, but he received no benefit. He then took Picric acid 6th, with some slight amelioration, but improved rap-

idly under the use of Picrate of ammonia tincture, one disk (two drops) three times a day. My last report from him was that for the first time in years he felt quite free from all his unpleasant symptoms.

In Intermittent Fever, (Ague), the Picrate has been used with considerable success by many Western physicians. It is claimed that in $\frac{1}{8}$ and $\frac{1}{4}$ grain doses every two or four hours it will arrest the paroxysm in a large proportion of cases, and that the tendency to return is not as great as under Quinia. It has been given successfully as a prophylactic. My experience in malarial fevers has shown me that many severe cases, in fact whole epidemics, present symptoms very similar to the symptoms of Picric acid and the picrates. In such cases, therefore, will they be found best indicated and most successful. Dr. Dillenbough writes to the "Medical Times" that he finds the Picrate useful in *pertussis.* Soon after reading his article I had several obstinate cases in adults. I gave them the 1ˣ dilution, five-drop doses, and the result was very favorable. It seemed to arrest the severity of the paroxysms at once.

POPULUS TREMULOIDES.

As we have no provings of this agent, I will quote the testimony of physicians of other schools relating to its physiological (toxic) action, also their estimate of its medicinal powers and virtues, with such clinical experience as they have gained from its use; after which I will give my own experience with the remedy in a few abnormal conditions.

Toxical Effects.—Dr. Paine (eclectic) says of his experiments with Populin:

In doses of five to ten grains, in a healthy person, it produces a *warm, pungent sensation in the stomach, followed by a glow of heat on the entire surface, and copious discharges of urine, and if the dose is repeated every two hours, until forty or fifty grains are taken, it causes nausea, vomiting, and slight purging of bilious matter, with fierce burning sensation in the stomach, very copious discharges of urine, irritation of the bladder and urethra, with slight fulness about the head, and general nervous excitement.*

Medicinal Effects.—It has been decreed to be tonic and febrifuge, and has been used in intermittent fever with advantage. An infusion has been reputed to be

a valuable remedy in emaciation and debility, lubricoid worms, impaired digestion, chronic diarrhœa, etc. As a diuretic it has been beneficially used in urinary affections, gonorrhœa, gleet, etc. Dose of the powdered bark, one drachm, two or three times a day. (KING.)

It is a mild and not an unpleasant bitter, very well adapted to cases of general debility, dyspepsia attended with torpor of the liver, or an unhealthy biliary secretion. . . . . Notwithstanding this agent has received no especial attention from the profession as a medical article, and none at all as an alterant, yet we regard it as a very useful remedy in those shattered and broken-down states of the constitution arising from the use of Mercury, from syphilis, chronic, hepatic and dyspeptic affections, scrofula, etc. It has been used with advantage, it is said, in jaundice, renal obstructions, chronic diarrhœa and dysentery. (SCUDDER.)

Professor Hollenbach recommends it for gonorrhœa and gleet. Dr. Coe, in his "Conc. Org. Remedies," recommends *Populin* for the following: "Indigestion, flatulence, worms, hysteria, jaundice, fever, cutaneous diseases, scalding and suppression of urine, nightsweats, etc." He writes:

As a remedy for *indigestion*, accompanied with *flatulence* and *acidity*, we know of no single agent more to be relied on.

In hysteria it is mainly useful as a tonic after the urgent symptoms are quelled. It will be tolerated by the stomach when other tonics are rejected, and tranquillize the sympathetic disturbance arising from uterine excitement. It is for this reason an excellent remedy for the dyspeptic symptoms accompanying pregnancy.

It is one of the most reliable remedies for the relief of nightsweats that it has ever been our good fortune to become acquainted with. We refer its curative action in this instance to its power of restoring and giving vigor to the secreting vessels of the skin.

Suppression and retention of urine are readily relieved with the Populin. . . . . Paramount to all the rest is its property of relieving painful micturition, heat and scalding of the urine. Did it possess no other curative value, we should esteem it an indispensable constituent of our Materia Medica. Its value in this respect is most apparent when the symptoms above named occur during pregnancy.

If Dr. Coe had used the Populin *uncombined*, his statement would be more valuable. It was mixed, however, with *Gum myrrh*. Such a practice is to be regretted, as it renders doubtful any clinical deduction. It is probable, from the knowledge we have from other sources, that the Populus was the principal agent in the curative process. In the recommendations given for its use

in jaundice, constipation, and dyspepsia, Dr. Coe combines it with Leptandrin, Podophyllin, etc., which robs his recommendations of much of their reliability. Notwithstanding Dr. Paine (eclectic) found it to cause great irritation of the bladder and urethra (see toxical effects), he remarks:

In diseases of the bladder, urethra, and prostate, I have found the greatest benefit from this article. In several most inveterate cases of *catarrh of the bladder*, I have found that two or three grains, administered four or five times a day, produced a most favorable impression. In the case of an old gentleman who had been troubled with this affection, together with *ardor urinæ* and chronic enlargement of the prostate for many years, and who was not able to obtain benefit from any of the ordinary remedies, relief was promptly given by the use of two grains of *Populin* three times a day. (The medicine was continued four or five months.)

The same writer says:

I have used the Populin with great success in *chronic gleet*. In several cases, when all other remedies had failed, I have succeeded in entirely removing the disease by the use of this drug for several consecutive weeks.

Dr. Paine tries to avoid the evident deduction favorable to homœopathy by explaining that the Populin "acts as a *tonic* to the bladder, urethra, etc."

According to Dr. Paine (eclectic) the Populus has been "highly recommended and extensively used in many chronic diseases of the uterus and vagina, especially in *prurigo*, with aphthous condition of the mucous membrane of the vagina, and an irritable condition of the lining membrane of the uterus."

Its irritant action on the urinary organs would render it very probable that the Populus would cause the above-mentioned conditions in the generative organs of women.

The Populus has not been used by practitioners of the homœopathic school—at least such experience has not come to my knowledge.

I have observed many apparent cures of debility from prostrating fever, dyspepsia, hysteria, etc., in domestic practice, and am confident that it is a medicine capable of becoming a *polychrest* of wide range. Its analogues are theoretically given (Vol. I), and I

believe its pathogenesis, when obtained, will sustain my idea of its sphere of action, which seems to include the digestive organs, the urinary and genital apparatus, and indirectly the sympathetic nervous system.

I have prescribed it, in a few instances, for symptoms similar to those mentioned by Paine in his record of its physiological effects. In one instance of dysuria, due probably to debility, its curative action was quite satisfactory.

Many physicians complain that our Materia Medica is already overloaded with remedies, and some are hasty enough to declare that they could throw them all away and practice successfully with a dozen. I cannot comprehend the cynicism or conceit which prompts such a remark. One's knowledge of the myriad forms of disease must be very limited if he will entertain such absurd opinions.

In my "Characteristics of New Remedies" I made mention of the eclectic clinical use of this remedy in diseases of the prostate gland, in which vesical tenesmus was the prominent symptom.

Since that was written I have had many opportunities of verifying the value of that clinical observation. I have not confined my prescriptions to cases of prostatic diseases alone, but to all cases where this one distressing symptom was prominent.

In three cases of extensive disease of the bladder and prostate, where the urine was scanty and contained a large proportion of blood and pus, and the tenesmus was exceedingly painful, the Populus in doses of five drops of the 1ˣ dil., every three hours, relieved in a very short time. It had no curative effect on the structural lesion, but made the patients more comfortable. In several cases where the tenesmus occurred in women, and the symptom was due to reflex irritation, the 2ˣ dil. afforded prompt relief.

In three cases of inflammation of the neck of the bladder in women, it removed the inflammation after Cannabis and Cantharis had caused but little improvement.

A lady who had been under my care for metritis, accompanied by vaginismus and cystitis, was discharged, apparently cured; but a

ride in the cars all day brought back some of the symptoms of weight, pressure, and aching in the pelvis, and, worst of all, vesical tenesmus, with frequent desire to urinate. I sent by mail some pellets saturated with Populus 3ˣ, of which she was to take six every three hours. In a few days she reported that all the symptoms disappeared in two days after taking the remedy. This sensation, called *vesical tenesmus*, seems to depend on a spasmodic contraction of the muscular fibres of the bladder, more especially those near the neck. In large doses Populus causes "*ardor urinæ, irritation of the bladder and urethra, with copious discharge of urine.*"

In the cases cured by me there was little pain *during* urination, but as soon as the last drops were voided, or a little before, a severe cramplike pain set in just behind and above the pubes; this pain often lasted ten or fifteen minutes.

I believe the Populus to be a medicine well worth an extensive trial, both by provings and clinical use, for only by both combined can we attain to the largest knowledge of a drug.

POLYPORUS OFFICINALIS.

This remedy is prepared from a fungus found growing on the *Larch tree* in all countries. It was formerly called Boletus laricis. It grows in masses, varying from the size of an apple to that of a large nutmeg melon.

It contains 72 per cent. of a resinous matter, some Benzoic acid, and various saline compounds. The Indians of the Rocky Mountains use it habitually as a purge. It requires twenty or thirty grains to act as a cathartic. Forty grains in divided doses, taken in twenty-four hours, is said to check the nightsweats of consumptives.

Dr. Burt collected the provings—one of which was made by the late Professor F. A. Lord—and published them, together with clinical cases, in the form of a monograph.

The chief reputation of this medicine has been gained in the treatment of obstinate *intermittent fevers*, or those agues which have been aggravated by exposures and neglect, or abuse of Quinine.

Dr. Lord reported many cases of ague, all previously drugged with Quinine, which were promptly cured by Polyporus. He also reported a few cases of ague which had not been subjected to any treatment. Some were benefited by the remedy; in others no apparent effect was observed. He incidentally remarks, that in one case it had no other effect than to remove a *jaundice*.

Many other physicians in the West communicated the results of their use of this fungus in malarial fevers. A large amount of testimony was collected both *for* and against its value. Some were quite enthusiastic, and believed it would rival Quinine; others thought they had found an ague-specific at last. Many claimed to have tested it thoroughly during a year or more, and found it wanting in any curative powers. Others, still, found it to act finely in one epidemic and fail in the next.

Such was Dr. Burt's own experience as well as my own.

I quote Dr. Burt's clinical results, also his opinion as to its sphere of action. His views correspond very nearly to my own. He says:

The first six months I commenced using the Polyporus I had universal success with it. Gave the remedy in more than one hundred cases, with but five failures. The cases where it failed were four of them tertian type, one quotidian, a desperate case, that tried me three months. Could only suppress it for one or two weeks at best, when it would return again. Last fall, when intermittent fever became an epidemic, and raged almost everywhere, my Polyporus commenced failing me. I could not cure more than one case out of five. I finally abandoned its use altogether for three months, then I commenced using it again with the same universal success that I had at first. I am using the remedy now with the best results.

The cases that the Polyporus will give us the best satisfaction in are those of long standing, that have been thoroughly saturated with Quinine and all kinds of remedies; where there is more or less disorder of the liver and abdominal viscera, with anæmia; sallow, jaundiced appearance of the skin; the bowels loose or torpid; but does better if the bowels are costive. Type, quotidian or tertian; acts better in quotidians. During the apyrexia the patient is far from being well; has headache; bitter taste in the mouth; tongue coated white or yellow, or may be anæmic; loss of appetite; more or less pains in the abdominal viscera, and especially the liver. Is very languid; may or may not perspire after the paroxysm; if he perspires *very profusely* it is rather against the remedy. Also, I have noticed in those cases where the patient perspires a good deal during the fever, the Polyporus will have but little, if any, effect upon the disease. If the food passes the patient undigested, the Polyporus is strongly called for,

and will cure the lientery like magic. Those cases where the patient seems to have almost continued fever, the intermissions are very short, can hardly be noticed, the fever is not very high, the remedy in my hands has acted like a charm. In acute cases I have had the best results with the remedy in quotidians, where the fever lasted a long time—might almost be called a remittent fever; during the apyrexia the patient feels very ill, with loss of appetite or canine hunger; has more or less gastric symptoms, with dull headache and great languor. During the paroxysm has more or less gastric symptoms; may or may not vomit; has severe headache, with pains in the back and limbs. The chill is generally light and short, the fever of long duration, and followed by perspiration, but not profusely; may or may not want water during the chill and fever, but not during the sweat; never craves water intensely during the paroxysm, like they do in fevers that call for Arsenicum. If the patient has a hard chill, strong fever, and profuse perspiration, has no gastric symptoms, and gets up as soon as the sweat is over, feeling well, the Polyporus will not cure him, at least that is my experience. In sporadic cases, the type may be quotidian or tertian, but better in quotidians, the remedy will be found to be one of the best now known to the profession, ranking equally with Quinine. But when intermittent fever becomes epidemic, and rages over large sections of the country, the Polyporus cannot be depended upon. If the patient is more or less jaundiced, it is a good indication for the Polyporus. Also, I have noticed that in consumptive patients the remedy will cure almost every form of intermittent fever that they may have. If the patient has a bilious temperament, it is a strong indication for its use. I have given it with excellent success in double quotidians. I think that the remedy will act better if the paroxysm comes on in the forepart of the day; if it comes on in the evening or at night I have not had such good results from its use. Acts best in the spring, summer, and winter; acts poorly during the fall.

As we might expect from the nature of the medicine, it has cured many cases of *periodical headache*, appearing at a regular hour every day; also cases of *prosopalgia* of an intermittent character.

One physician reported a case of "bilious sick-headache," in a woman past the climacteric, cured by drop doses of the mother tincture.

Dr. Burt believes that its effects upon the liver are similar to those produced by Leptandra. He says he has given it in many cases of *jaundice* with good results.

The enteric symptoms of Polyporus give a very good picture of malarial epidemic *diarrhœa* and *dysentery*. It has been found successful in such cases by Drs. Holcombe, Wood, and others. Even in chronic cases it has been used advantageously. You will find that diarrhœa and dysentery of an intractable character often

attend epidemics of ague. Sometimes the ague-paroxysm, *i. e.*, the chill, fever, and sweat, are replaced by intermittent or remittent attacks of diarrhœa or dysentery. In such cases no remedy will prove of any service unless it corresponds to the antimalarial genius of the malady, and possesses antiperiodic powers. Often have I had the most brilliant success with China, Quinine, Arsenicum, and Gelseminum when the ordinary remedies failed. They were only indicated by the *periodical* appearance of the symptoms, not the special ones, the stool, pain, etc. The periodicity of the disease is often masked, and will require your closest scrutiny to discern it. When you do, treat it as you would any ague. In this form of disease the Polyporus has made many excellent cures.

The presence of Benzoic acid in the Polyporus may give it some power over urinary and rheumatic affections.

POLYPORUS PINICOLA.

This species of fungus grows upon the trunk of the White Pine. Its general properties are similar to the larch agaric.

Dr. P. H. Hale first used this medicine in homœopathic practice. He got his knowledge of its antiperiodic power from the lumbermen of Northern Michigan.

It is also used as a remedy for ague by the people of the Middle and Southern States, who macerate it in whiskey and take it during the intermission.

I place about the same estimate upon its powers that others place upon the P. officinalis. The general testimony is, that the best effects obtained from the pine-fungus have been observed in *intermittent fevers of quotidian type.*

The fungi found upon the oak and other forest trees possess medicinal properties. Some are very powerful, and a few resemble the poisonous species found growing in the earth.

QUEBRACHO.

This is a Brazilian plant, the *Arpido-sperma quebracho*, a tree belonging to the Apocynaceæ, and is used as a febrifuge by Brazilian physicians.

In provings on animals there is a *respiratory paralysis*, at first cessation of the flanks, then gradual diminution of the laryngeal breathing goes hand in hand with paralysis of the extremities. The beats of the heart diminish one-half in a few minutes.

When given therapeutically in phthisis, pleurisy, etc., it failed to influence the fever, temperature, or pulse. But in all cases in which *dyspnœa* was present it relieved that symptom.

In cases of *asthma*, with livid face, could only breathe on sitting up, after a dose of a teaspoonful of the tincture (1 to 10), equal to the $\frac{1}{10}$th dilution, soon relieved, the face became red, and the patient could lie down.

When *dyspnœa* was so great that a cyanotic hue pervaded the face and lips it was always diminished or removed by Quebracho. The testimony goes to show that it is homœopathic to dyspnœa of all kinds. In some it is merely palliative, in others curative. It may prove a cardiac remedy also.

QUINIA.

The salts of Quinia, an alkaloid prepared from the Cinchona (Peruvian bark), called "China" in our school, are very extensively used, and *abused*, by all schools of medicine, *not* excepting the homœopathic.

Although *China* is extensively used by our school, and its symptomatology well understood by our physicians, the same cannot be said of Quinine.

Therefore I consider that I am justified in placing it among the new remedies.

If Hahnemann had experimented with the alkaloid instead of the bark, he would have seen more decided febrile effects, and his belief in its power to cause fever, even intermittents, would have been confirmed by more decided results.

I will quote from Stillé's "Materia Medica" the following clear and distinct account of the action of Quinine on man:

When Sulphate of quinia is administered to a healthy person, in quantities not exceeding six grains daily, in doses of half a grain or a grain, it produces effects very analogous if not identical with those of the simple bitters. At first

no sensible effects whatever may be experienced, but, after a short time, the appetite is increased, the food appears to be more rapidly digested, the pulse becomes somewhat fuller and stronger, if not accelerated, the temperature of the surface is correspondingly elevated, the processes of sanguification and nutrition are promoted, and other vital functions are moderately stimulated either directly or indirectly. In other words, the medicine operates as a pure tonic, according to the definition of the term given in this work. In irritable states of the digestive organs, or of the system at large, these effects are sometimes exalted, by the free use of the medicine, into a moderately febrile state, with anorexia, gastric oppression, thirst, a furred tongue, accelerated pulse, heat and dryness of the surface, and headache, or other cephalic uneasiness. This condition, however, is probably not the direct result of the action of the medicine upon the system at large, but indirect and symptomatic of some local irritation produced by it, especially in the stomach or other parts of the digestive apparatus. This state of excessive excitement is rarely experienced in health; because with an increase in the quantity of Quinia administered other effects are developed of a contrary tendency, which overcome its general excitant influence.

Given to the amount of from six to twelve grains daily, in divided doses, or to a less amount in a single dose, Sulphate of quinia evinces a tendency to act specially upon the brain, and often produces very decided effects upon that organ. The quantity, however, necessary to the production of obvious cerebral symptoms varies greatly in different individuals; some evincing an extraordinary susceptibility to the influence of even small doses, while others scarcely feel the largest quantity above mentioned. The first cerebral phenomenon usually presented is abnormal sounds, such as buzzing, roaring like that of a strong wind or of a cataract, singing, hissing, ringing, etc. Along with this there is generally more or less hardness of hearing, which, indeed, is one of the most characteristic effects of Quinia. Uneasy sensations in the head are also frequent, as of weight, fulness, tension, and sometimes positive pain, though very seldom severe. The circulation is not much affected; the pulse being sometimes increased, sometimes diminished in frequency, but for the most part little altered.

When, instead of the quantities above mentioned, from twelve to sixty grains or more are given daily, in divided doses, the effect upon the cerebral functions is increased, and a decided sedative influence upon the circulation produced, as evinced by a diminution of the frequency and force of the pulse, proportionate to the amount of the salt used. Along with the abnormal sounds before referred to there is now giddiness or dizziness; the individual, if erect, often staggers; occasionally there is irregular muscular movement; the hardness of hearing is not unfrequently increased to positive deafness, and in a few instances vision is disturbed and blindness induced. At first, if the individual dose is large, there may be flushing of the face, headache, and sometimes epistaxis, indicating decided sanguineous determination to the head, and occasionally, though very rarely, active delirium occurs. In experiments upon dogs, even meningitis has in some relatively few instances been brought on by very large doses. (Briquet, "Traité Thérap. du Quinquina," p. 161.) But these evidences of overexcitement of the brain give way to others indicating a reduction of nervous power, such as diminished hearing and sight, uncontrollable tremblings, depressed spirits, sigh-

ing or yawning, and very rarely a kind of mental disorder, compared by Dr. James McCaw, of Virginia, to delirium tremens. ("Stethoscope," ii, 666.) In some instances a tendency to drowsiness or stupor is evinced, in others morbid wakefulness, but in the greater number neither the one nor the other. Though the pulse is at first sometimes temporarily excited by these large doses, probably in sympathy with the excited brain, it in general soon becomes slower, and always feebler. The pulsations of the heart are often reduced ten or twelve in the minute, sometimes as much as twenty or twenty-five, and the whole number in the minute to forty, but seldom if ever lower. In strength the pulse is diminished very nearly in proportion to the dose, as shown by the experiments of Briquet upon dogs, by means of Poiseuille's hæmadynamometer; and, in extreme cases, it may be so much reduced as no longer to be felt at the wrist. The skin at the same time becomes cool, pale, and moist, and the face pale or livid, and shrunk.

This prostration under the use of Quinia may be carried so far as to constitute real poisoning. Death has often been produced in dogs by excessive doses; and in one case, cited by M. Guersant, the same result is said to have taken place in the human subject. In this case, M. Bazire, a practitioner of medicine, in an excited state of imagination bordering on insanity, believing himself to be attacked with pernicious fever, took within a short time sixty grams (very nearly two ounces troy) of Sulphate of quinia by the mouth and rectum. Symptoms of great prostration with loss of sight and hearing came on, which he unfortunately ascribed to the pernicous fever, and hoped to counteract by a continuance of these enormous doses. In the course of nine or ten days he took, additionally, five ounces of the salt. Another physician being then called in, found him covered with cold sweat, completely deaf and blind, with difficult and rattling respiration, profound stupor, and an expression of countenance like that of drunkenness. Though partially roused, with much difficulty, so as to give rational answers, he quickly became delirious and died. ("Dict. de Méd." 2e ed., xxvi, 570.)

Giacomini, who first called attention to the powerful sedative influence of Quinia, records the case of an individual who took by accident about three drachms of the Sulphate. Extreme prostration came on, with an almost absent pulse, cold skin, slow respiration, feeble voice, and apparently imminent danger of death, which was, however, averted. In these prostrate cases the pupil is often dilated, and there is sometimes coma.

From Wood's "Materia Medica" I take the following relating to its

Poisonous Effects.—The earlier historians of Cinchona did not fail to notice that ill-effects occasionally arise from its use, such as gastric derangement, colic, diarrhœa, headache, restlessness, sleeplessness, and deafness; but these symptoms were always temporary, and seldom reached so high a degree as to excite alarm. But after the discovery of Quinia, which contained in a small bulk the principal powers of the medicine, cases occurred which were distinguished by very alarm-

ing symptoms, such as delirium, coma, blindness, deafness, gastralgia, epileptiform convulsions, dyspnœa, aphonia, paralysis, congestion of the lungs, and hæmaturia. Trousseau speaks of a young woman who was delirious for a whole day after taking twenty grains of Sulphate of quinia. In another case, that of a male, forty-six grains rendered the patient blind, deaf, and delirious, and so giddy as to be unable to walk. He also vomited continually. A case is reported by Gélinau of a delicate and nervous lady, who, after taking ten grains of Sulphate of quinia on an empty stomach, was attacked in about two hours with violent abdominal pains, rigors, and general prostration with cold sweats. The face was pale, the eyes sunken, the pupils dilated, the teeth clenched, and the limbs stiff; confused answers were given to questions; the respiration was calm, the pulse 60. In about an hour the pulse rose to 80, there were ringing and buzzing in the ears, and the catamenia, which were not then due, made their appearance. The next day the patient was as well as usual, except that she suffered from dulness in the head and heaviness of the limbs. Giacomini reports the case of a man of middle age who took by mistake about three drachms of Sulphate of quinia at a single dose. He gradually became giddy and feeble, and then insensible. Nine hours after taking the medicine he lay motionless and pallid, the fingers were bluish and cold, and the whole surface cool, the respiration slow and suspirious, the pulse regular, but slow and hardly perceptible, the pupils widely dilated, the sight and hearing almost extinct, and the voice extremely feeble; the thirst was great, the tongue pale and moist, and the breath cold. The patient could not leave his bed until the fifth day. A similar case is narrated by Dr. Baldwin, in which sixty-eight grains were taken in the course of about twenty hours. A case is reported of a man who after taking three doses of Sulphate of quinia, each of eight grains, and at intervals of four hours, experienced the usual phenomena of cinchonism, then became drowsy, and afterward, by degrees, hemiplegic. He did not recover the use of his limbs. Græfe, of Berlin, met with two cases of amaurosis which he attributed to Quinia, and Simon several cases of hæmoptysis following the administration of this substance to persons affected with intermittent fever.

But the evidences of the poisonous properties of this drug are also furnished by cases in which it proved fatal to life. Four such cases are collected by M. Mélier. In one of these the patient was affected with delirium and coma, and died on the second day. Guersant has given an account of a physician and his wife, both of whom were poisoned by this preparation, the former fatally, after taking nearly five ounces of Sulphate of quinia within the space of eight or nine days. The symptoms were such as have been detailed in the case of Giacomini. Dr. Baldwin has reported the case of a child, six years of age, who died from taking eight grains of this salt, in two doses, with an interval of three hours between them, and with symptoms like those already described. Whenever, in such cases, the body has been examined after death, the same lesions have been found as upon dissection of animals destroyed by the same cause, viz., congestion of the lungs and brain, and in some degree also of the stomach.

A fatal effect, it has just been stated, may follow the administration of comparatively small quantities of Quinia. Such doses, when continued, have occasionally produced toxical, but less serious consequences. Dr. Van Buren saw

partial loss of hearing result from taking two-grain doses of Quinia for a period of some weeks, and a case of amblyopia of three weeks' duration, and quite intractable, follow the use of four-grain doses every four hours for a week.

But in some cases, it should be borne in mind, enormous doses have been taken without fatal or even alarming consequences. In the case of the lady related by Guersant, and referred to above, about six hundred grains were used within the space of a few hours. Banquier states that one of his patients took seventy-two grains of Sulphate of quinia by mistake and without hurt; and Tomasi di Spineto asserts that ninety grains may be given several times a day without danger. "A medical friend in Alabama," says Dr. Dickson, "assures us that he had administered thirty grains of the solution of Quinine every hour for seventeen successive hours; and we have heard authentically of a Western physician, who emptied into the stomach of a patient laboring under bilious remittent an ounce bottle of Sulphate of quinine in one night. From thirty to fifty grains are now spoken of as not unfamiliar doses, and even one hundred grains are occasionally given at once, and, we are assured, both with safety and striking success." Dr. Drake mentions a man at Memphis, Tenn., who took eighty grains of Quinia at a single dose, and another at Montgomery, Ala., who consumed an ounce in the course of three days, and recovered. At Plaquemine, La., an old lady used ten grains every two hours until an ounce had been taken. No bad effects followed. It must not be forgotten that Sulphate of quinia is often largely adulterated.* The fact may help to explain the innocuousness of the medicine in some of the many cases resembling the above, which are said to be of frequent occurrence in the Western and Southern portions of the United States.

You see in these descriptions an excellent picture of the *primary* and *secondary* effects of the drug.

At first, from moderate doses, all the normal functions appear to be simply increased. Afterwards, from larger doses, these functions become strikingly abnormal, until the brain and other important organs are congested and inflamed. Death may result from its ultimate primary effects, namely, from meningitis or apoplexy, or from general internal congestion.

If the drug is continued too long, the hyperstimulation and congestion are succeeded by failure of nervous power (secondary), as above delineated.

You will remember that when describing the primary and sec-

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* I have seen specimens of Quinine, especially the Quinine supplied to the army during the late war, which contained nearly 70 or 80 per cent. of Salicin! It was probably a similar spurious substance which was given in massive doses without causing fatal consequences.—HALE.

ondary action of drugs, I mentioned that we may get secondary effects, *without the primary*, from very large doses.

You see this illustrated in the effects of massive doses of Quinine, which cause *extreme prostration, almost absent pulse, cold skin (pale, moist, livid, shrunken), slow respiration, feeble voice, coma,* and in many cases *collapse unto death.* This it causes by its paralyzing action on the nervous centres without previous stimulation.

The homœopathicity of Quinine to *fever* is clearly set forth in its primary effects. But I must impress it upon your memory, that the febrile symptoms there described belong to no other class of fevers but the *malarial,* sometimes called the miasmatic and paludal.

As to the exact nature and origin of the causes of these fevers, the medical world is not unanimous. It is my belief, however, that such fevers *have a cryptogamic origin;* that the spores of certain cryptogamic plants, invisible to the naked eye, are absorbed into the system, probably through the respiratory or digestive organs, and are carried into the blood, where they cause by their fermentive (propagative) force, febrile manifestations. I believe with Salisbury, Bartlett, and others, that the prodroma and the febrile paroxysm (chill, fever, sweat) are the efforts of the organism to throw off the accumulated poison. I believe that Quinine destroys the spores of the fungi in the blood, and is also homœopathic to the symptoms of the fever itself.

I will take up, in regular order, the symptoms of malarial fever, and show the close similarity between such symptoms and those of Quinine poisoning.

(1.) *The Prodroma.*—It is a singular but well-known fact, that persons under the influence of malaria (*marsh miasm*) experience for days, even weeks, previous to the attack an unwonted exhilaration, an exuberance of healthy sensations. The appetite increases, food is intensely enjoyed, the digestion is strong, and the physical strength is actually increased. But right in the height of this apparent excess of health comes, unexpectedly, the chill, often congestive, followed by the other febrile symptoms.

Now, if you will remember the symptoms of Quinine when

given in moderate doses, you will see an excellent picture of this prodromic state. It would seem as if the fermentive force of the poisonous spores in the blood actually *stimulated* the functions of the body (primarily), until the *excessive fermentation* ended in the explosive paroxysm.

(2.) *The Chill.*—An ague chill may be a simple *coldness*, or *coldness with shivering*, or a condition of general congestion, known generally by the names of *congestive chill, sinking chill*, or *syncopal chill.*

This last condition may occur when the patient believes himself in perfect health, without any unpleasant warnings. It resembles the collapse of cholera in all but the colliquative discharges, and sometimes these are not wanting. It resembles also the poisonous effects of Quinine when taken in massive doses (fifty to two hundred grains). The reaction from this collapse, or from a simple chill, results in a febrile paroxysm (intense heat, congestion, etc.), and is followed by profuse sweat.

In bad cases no reaction occurs, but the victim dies in spite of all efforts at stimulation. Sometimes the sweat is absent after the fever. In such cases no clear *apyrexia* obtains, but an erethistic fever smoulders until the next attack (one, two, or three days).

In cases of Quinine poisoning we can get all these stages, with more or less intensity, depending on the amount taken into the system, or the constitution of the experimenter.

So in malarial poisoning. The intensity of the fever will depend on the amount of poison in the blood and the strength of the patient's constitution.

What *therapeutical* deductions can we make from these facts? I will try to explain.

Quinine is homœopathic to a large proportion of *miasmatic fevers*, especially if they assume a *quotidian* type. It is also curative in a large proportion of the "masked agues," *i. e.*, paroxysmal attacks (generally quotidian), without chill, fever, or sweat, but consisting of neuralgic pains, spasmodic manifestations, dysenteric symptoms, rheumatic pseudo-inflammations, or any other group of symptoms occurring at the same hour every day or two. Some-

times the attacks merely consist of a dull, heavy aching all over, constituting what is known as "dumb ague."

You will find a pathogenesis of Quinine in the old "Symptomen Codex," which contains a large number of characteristic Quinine symptoms, and many that are worthless. There is a late proving, very thorough and careful, in the "Amer. Jour. Hom. Mat. Med." for May, 1875, by Dr. J. C. Morgan.

You will readily understand that if the theory of the cryptogamic origin of ague be true, the selection of Quinine is not always to be made from the similarity in symptoms. It is true that the ague paroxysm often presents a close similarity, in symptoms, to the symptoms of Quinine. The pathological conditions also are similar. But there are many cases, often a majority, of agues which present a sameness which prevents all attempts at differential diagnosis. They simply have a chill, fever, and sweat, and they "ache all over;" the attacks occur every day, at about the same hour, and that is all there is of it. The chasing after minute symptoms, the aches and pains, the likes and dislikes, the hour of the day, the order of the appearance of the symptoms, etc., are all useless as aids in the successful treatment of the majority of cases of true epidemic malarial ague.

I believe the true method of prescribing Quinine in ague to be in accordance with the law of dose which I have so often explained to this class.

During the *prodromic* stage, and to persons who must expose themselves to miasmatic influences, the Quinine can be given as a prophylactic. It has been much used in armies encamped or campaigning in malarious districts, also by travellers who are obliged to traverse countries devastated by paludal fevers. It has been found that a few grains a day will prevent the access of the disease. I believe that a few grains of the 3^{x} trituration would act as a preventive, unless we must rely upon the antiseptic action of the drug upon the fermentive process going on in the blood.

During the *paroxysm*, Quinine should be given in a high trituration or dilution, from the 6th to the 30th, according to the intensity of the fever, congestion, and nervous phenomena.

I know from actual experience that the use of Quinine *during*

the paroxysm, in this manner, greatly mitigates the symptoms at the time, and I am certain that it requires less of the medicine to be given through the apyrexia.

At one time the allopathists recommended that Quinine be given during the paroxysm, "in order to more effectually break the fever;" but although they prescribed it in doses of one-twentieth or one-fortieth of a grain every hour, the aggravations were so painful that the practice was abandoned.

I once supposed that the congestive chill, which is often met with in bad cases, corresponded to the secondary effects of this drug. But I am now satisfied that it is an ultimate primary effect. If Quinine is used at all during the chill, it must be used in small doses (one-tenth or one-twentieth of a grain every half hour). But the treatment of such attacks with Quinine is not very successful. I have known doses of all sizes to be given during the collapse without the slightest effect, even when aided by large quantities of brandy and other liquors. I do not believe you will find it the best remedy in this condition. (Amyl nit. is much better.)

The best treatment for the sinking chill, in addition to the use of medicines *primarily* indicated, namely, Arsenicum, Veratrum, Aconite, etc., is the use of the *hot mustard bath*. Strip the clothes from your patient, or leave them on if he is very weak, and place him in a bath of hot water (120° to 130°), in which has been dissolved an ounce or two of powdered mustard. Rub the patient well while in the water, and do not take him out until reaction has set in, and the skin is *red* and *warm*, and the external blood-vessels filled. If a bath is not obtainable, rub the patient with dry mustard, or cayenne pepper, or any substance which will bring back to the surface the blood which is stagnating in the central organs of the body.

The radical treatment of malarial fever must be applied in the apyrexia. During the intermission, let the type be what it may, intermittent or remittent, give the Quinine, if indicated, in doses graduated to suit the age, sex, constitution, or idiosyncrasy of your patient.

No time should be lost, in cases of malignant malarial fever, after the first paroxysm or congestive chill, in getting the patient under the influence of Quinine.

We now come to the consideration of the doses to be used in the apyrexia.

The symptoms of the apyrexia resemble the secondary symptoms and pathological condition caused by Quinia, namely, great debility, resulting from the primary congestion, fever, and sweat. The nerve-centres are left in a very weak condition, and the normal reflex functions are semi-paralyzed.

In such condition large or appreciable doses are required. Large experience has enabled physicians to decide with great accuracy the quantity necessary to be used to arrest the paroxysms.

Twenty grains of Quinia, in ordinary cases, is the maximum quantity. This will vary from *five* grains in susceptible persons, with paroxysms of moderate severity, to *fifty* grains in cases of pernicious congestive fever, when death would probably result if another paroxysm was permitted.

The manner of giving Quinine varies with the whims and experience of the physician. Some prefer to give five or ten grains just after the paroxysm, and the same quantity just before.

In severe cases, where the apyrexia is short, this is a good plan. But in ordinary cases, my experience has taught me that it is best to begin about *six* hours before the expected paroxysm, and give one or two grains an hour until the chill comes on, or the chill-time is passed. If I were called to a case of malignant congestive ague, and was informed that another paroxysm was expected in an hour or two, I should not hesitate a moment before giving twenty or thirty grains *immediately*. In no other way can you be sure of warding off the impending paroxysm.

The relations of the dose of Quinine to age I have studied, as in the case of the Bromides. I have ascertained that the proper quantity is about *one-tenth of a grain for each year of a child's age until five years, provided the dose is repeated every hour*. If a single dose is to be given, and not repeated, the quantity would rise to *one grain*. *For every five years until the age of twenty, I would double the dose* to be given hourly, and *quadruple* it if only a single dose is to be given, as in desperate cases.

It may be asked, Are there no substitutes for Quinia? There are, but they are not perfect substitutes.

Ague remedies may be divided into two classes, namely, those

which have the power, like Quinia, of poisoning protozoa, infusoria, and cryptogamic fungi, and those which have not this power.

In the first class I shall place *Quinine, Gelseminum, Eucalyptus, Nux vomica, Arsenic,* and *Cedron.*

In the latter class I shall place Eupatorium, Cornus, Salicin, Arnica, Natrum mur., and Hydrastis (Berberina).

All these correspond to the *periodicity* of the ague paroxysm, but there is another class which does not, while they possess the power of the first class of destroying animal or vegetable germs, namely, Carbolic acid, Sulphite of soda, Salicylic acid, and a few other chemical compounds.

The medicines in Class I will always remain the chief remedies for malarial fevers. They will have to be used in more or less appreciable doses. If you have read Hahnemann, you will remember a suggestive observation, that in many cases neither China (attenuated) or any other remedy will prevent the recurrence of fevers due to marsh-miasm. This is true at this day, for many cases cease to be influenced by any remedy, and only a residence in a non-miasmatic district will eradicate the disease. We can do better, however, than could Hahnemann, for we have a larger number to choose from.

The medicines in Class II will not be found useful in *epidemic* malarial fevers, especially if of the pernicious type. Boastful homœopathic physicians often claim that they can cure *any* case of ague with the high potencies of this or the first class. But those who have practiced many years in malarious districts know that such assertions are false. I need only refer you to the writings and experience of such men as Holcombe, Ellis, Douglas, Marcy, Pulte, and hundreds of others in this country; also Hughes, Baehr, Roth, Kafka, and others in England and on the Continent.

I have personally known and been a close observer of the practice of many high dilutionists. Some I believe to be honest, and they thought they cured veritable cases of epidemic ague when the patient had cured or arrested the paroxysms with Quinine, taken *sub rosa.*

Others I know to be dishonest. They gave attenuated doses as long as they dared to, and then resorted to Quinine, or allowed the patient to pass out of their hands.

I do not deny that agues can be cured by the high potencies, or attenuated medicines. On the contrary, I affirm that such is the case. But we must sharply define the kind of ague cured by appreciable and non-appreciable doses.

If the blood of the patient is saturated with the malarial poison, appreciable quantities of the medicines in Class I or III are required.

If the blood contains only a small quantity, *i. e.*, if the paroxysms are slight, the medicines in Class II will suffice, or the remedies in both classes, in attenuated doses.

There are many cases of chronic or persistent ague, in all its protean forms, which do not depend on the presence of poisonous germs in the blood. These have long ago been cast off by the organism. The ague paroxysm, the periodical attacks of pain, malaise, etc., are kept up from *habit*. The profound impression made upon the nervous system by the original malady is continually perpetuated by that strange tendency to *habit* which adheres to animal and vegetable organisms.

In this class of cases many very striking and notable cures are made by the highest dilutions. I have known of, and have myself cured, old, obstinate agues, with Sulphur 30th and 200th, Arnica 6th and 12th, Arsenicum 30th and 1000th, and Natrum mur. 30th and 1^{m}.

I have also known similar cases to be cured by other dynamic forces, such as diversion of mind, the influence of hope and joy, the excitement incident to an intended journey, and even a mistake as to the time of day. And such cures are often just as good and veritable as when made with dynamized medicines.

I cannot too strongly condemn the habit common with allopathic, and even with homœopathic physicians, in malarious districts, of giving Quinine indiscriminately whenever a patient has a chill and fever resembling ague. Unless the physician is absolutely certain that the attack is due to miasmatic poisoning he should wait until the disease shows its true character.

There are certain rules which should be followed in order that the use of Quinine, in appreciable doses, should be attended with safety and success.

The *one important rule* is that Quinine, in doses below the 3^{x}

should not be given (except in dangerous cases) until the *tongue is clean or cleaning, the pulse open and soft*, and *the skin moist and cool.*

If given in other conditions, Quinine does not generally act favorably. It will change an intermittent or remittent into a continued fever; and I have known it to cause a typhoid.

How shall we bring about the condition of tongue and pulse? I answer: By prescribing the specific remedies to remove the functional disturbance of the liver and gastric organs. The proper use of Aconite, Verat. viride, Mercurius, Podophyllin, Leptandrin, Euonymin, and Nux vomica will usually remove the coat on the tongue, and bring about the desired condition of the circulation.

Then you can suspend the use of all other medicines and give Quinine, if Gelseminum, Arsenic, Eucalyptus, or some other remedy will not cure the patient, or if Quinine is the indicated remedy.

Aside from its curative power in the class of diseases I have mentioned, the curative sphere of Quinine is limited. I utterly deny its so-called "tonic" power in all cases. It is only when malaria lies at the bottom of the debility that Quinine does any good.

The apparent tonic influence is only a temporary stimulation, which soon leaves the patient weaker than before.

Nor do I believe it is of any value in true pyæmic poisoning, with or without fever. Although it is said to destroy bacteria and infusoria, experience has not proven that its value in septic poisoning is in any way superior to other "tonics," or equal to the Sulphites, or Carbolates, or Arsenic. The Carbolate and Carbazotate of quinia have been recommended in such cases, and bid fair to prove very efficacious if used with judgment and in proper doses.

The action of Quinine on the *ears* may be taken advantage of in our practice. It causes, with the fulness, tightness, and congestion to the head, ringing, roaring, and other noises in the ears, sometimes of a distracting nature, and often complete deafness for days and weeks, and sometimes for life.

The *aurist* will find Quinia more valuable than China in the treatment of congestive and nervous affections of the ear. Many

cases of *tinnitis aurium* cured promptly by the use of Quinia 3x are on record, also many cases of *nervous deafness.*

Quinia acts on the *eyes* no less perniciously when given in large doses than on the ears. It causes *dimness of sight* and *temporary blindness.* The defect of vision is sometimes limited to one eye or begins in one eye. The pupil of the affected eye is very generally dilated, objects appear double or unnaturally small, and the eye is injected and suffused. In toxic doses it has caused *amaurosis,* ending in total loss of sight.

It remains for the *oculist* to study and define the true sphere of action of this medicine in diseases of the eye.

Although Quinia seems homœopathic to congestive headache, meningitis, and cerebro-spinal congestion and inflammation, it has not been used by our school in those diseases to any extent. I have used the 6th in congestive cephalalgia, when *ringing in the ears* was present, and it seemed to act favorably. In *neuralgic headaches* it is more generally useful, and when periodic will cure them promptly.

Ringer says: "It has long been recognized that Quinia has most influence on the *supraorbital branch of the fifth nerve.* This branch is most often affected with malarial neuralgia; but even non-periodic neuralgia of this branch is probably more amenable to Quinine than neuralgia of the other branches of the fifth or other nerves." In such neuralgias the smallest doses will often promptly cure. The 3x trit. will sometimes make surprising cures.

No drug, with the exception of Mercury, has been so fearfully abused and has worked such injury to the human race.

It has been used without sense or reason in nearly every disease mentioned in the prodigious "Nosology" of Dr. Good.

It is still a pernicious habit, not confined to allopathists, to give Quinine in fever *so soon as a remission occurs.* It is a habit fraught with the most injurious consequences.

The same may be said of the habit of prescribing it after any disease has run its course, leaving the patient weak. Unless it is specifically indicated in such cases do not give it. The natural recuperative forces of the organism, or a more appropriate remedy, will insure a good convalescence.

Hahnemann, with his deep insight into the curative power of

drugs, gives the following symptom indicating China in debility: The patient sweats profusely, especially on the back and neck, *when he sleeps*. This is the characteristic indication for Quinia; and when you find this symptom the lowest triturations of this medicine will remove the debility.

Dr. Wood (allopath), in his "Practice of Medicine," writing of Quinia in *rheumatism*, curiously gives the same indication. In his "Materia Medica" he also says:

> In protracted diseases, particularly those of a febrile character, though perhaps sthenic in the beginning, the vital forces are gradually impaired by their overexercise, and a state of debility ensues requiring tonic treatment. Here, too, the preparations of bark are the most efficient. It is highly important to know exactly when the period for this treatment has arrived; for if prematurely employed it may injuriously aggravate the excitement. I have noticed that the occurrence of *nightsweats*, under these circumstances, offers one of the best criteria of the new condition. When a patient with a febrile disease, not having been especially affected with diaphoresis, *begins to sweat profusely whenever he sleeps, and only then*, I consider the symptom as an almost sure sign of debility; and Quinia, though previously contraindicated, may now be used with safety and advantage.

In debility from loss of the fluids of the body, with this symptom, I prefer the Tincture of china.

In no class of diseases has Quinia done more injury than in those of the *lungs*. In animals poisoned with Quinia the lungs are found engorged. The functions of the lungs are always embarrassed (in men) from large doses. It is not unusual for persons, under the use of large doses, to complain of tightness and oppression of the chest, while the face is pale, and wears a look of distress. Sometimes, indeed, there is severe dyspnœa, and a sibilant rhonchus is heard in the bronchi.

Imagine, then, what must be the consequences of giving large doses of Quinine during or after pneumonia, and during the various stages of phthisis. I have known pneumonia to be caused by the vicious habit of physicians or laymen giving Quinine after a chill from a common cold, on the supposition that it was an *ague*.

It is often given for hectic fever. When given during the incipient stage of phthisis, it *fixes the hold* of that terrible malady

on the patient, who might otherwise have been cured by appropriate treatment. (Trousseau says the same of Iron.)

Thousands of persons lapse into pulmonary phthisis after protracted agues treated by large doses of Quinine. In many cases the drug (and the physician) is to be blamed.

It was at one time supposed that it was not safe to give Quinine to pregnant women, but no authentic case of miscarriage or premature labor has yet been reported from its use. It was also alleged that it acted *during* labor as a *uterine motor-stimulant.* This, too, has been denied. I am of the opinion, however, that in cases of protracted labor, when the pains have become feeble, and a *general* condition of prostration sets in, with *no* tendency to convulsions, a few grains of Quinine will revive the failing energies, and aid in bringing the labor to a favorable termination. Several cases under my care, in which it acted well, tend to confirm this recommendation.

Some German physician, believing in the infusorial origin of "*hay fever,*" claims to get good results from throwing a weak solution of Quinine up the nasal passages. This recommendation was largely published in the newspapers and medical journals, but it has utterly failed in my practice, and I have never heard of its proving of any value in the disease as it appears in this country.

Having said all in favor of this powerful drug which I can consistently, I will close by again cautioning you to use it with great care and discrimination.

RHUS AROMATICA.

J. T. McClanahan, M.D., Brownville, Mo., writes concerning this plant:

In presenting this remedy to the medical world I do so from a firm and honest conviction that I am introducing one of the most valuable therapeutical agents ever introduced from the vegetable kingdom. Time and space will not admit of any further preliminary remarks, hence I enter into the merits of my subject at once. The only published information that I have seen concerning the Rhus aromatica is in Wood's "Classbook of Botany," to which I would respectfully refer those interested. It is a shrub, growing from two to six feet high, inhabiting high rocky soil; stems straight, branching near the top; flowers yellow, fruit clustered, red, seedy, and acid. When the bush is fractured it emits a strong

odor, from whence it takes its common name. The bark of the root is the proper medicinal part.

This remedy was successfully used by my grandfather, Dr. John Gray, for over thirty years as a sovereign remedy in the treatment of *diabetes*, and to this use alone he confined it, and for many years after was used in the same capacity by my father, Dr. F. McClanahan. He it was, I believe, who first suggested its use in other diseased conditions of the genito-urinary organs. I could give many interesting illustrations of cures that have been related to me, more especially diabetes, but it is my purpose only in this article to relate cases in practice that have come under my personal knowledge and experience. I will not attempt to enter into any argument regarding the pathology of diabetes, for so far as I have been able to learn such attempts have all been vague and unsatisfactory, and modern therapeutics has thrown very little light upon the treatment of this disease. Hence its treatment has been speculative and seldom curative. My first knowledge of this remedy, however, was in the treatment of this disease.

A few years since, when I was a student, Mr. A., aged twenty-seven, came under my father's treatment, presenting a cadaverous appearance, emaciated, and haggard, with all the usual symptoms of diabetes insipidus. There was no particular change in the urine, except that it was very much increased in quantity and of rather low specific gravity. He was one of the most woe-begone-looking men I had ever seen, and to my mind he possessed little if any chance for recovery. But under the influence of teaspoonful doses of the powdered bark of the root, given in a wineglass of sweet milk, three times a day, together with proper diet, regular habits, etc., he made a complete recovery in four months, and to-day enjoys good health.

Three years ago Mrs. B., aged thirty-seven, mother of five children, presented herself to me for treatment. After a careful examination I diagnosed her case diabetes mellitus. The history of the case revealed the following facts: That ten months previous her attention was first attracted by frequent calls to micturate, and that she was obliged to get up during the night to void large quantities of urine, which had been steadily increasing until she had become so feeble that she was compelled to abandon her housework. There was also a sense of general lassitude and languor, with pain in the back and considerable thirst; appetite variable, sometimes ravenous and sometimes deficient; skin sallow and doughy; temperature increased to 101½°; slight cough, and occasional nightsweats; loss of flesh; pulse little affected, except that when diarrhœa would sometimes supervene for a few days it would present the usual feebleness and rapidity. Under the usual tests I found the urine to contain sugar—specific gravity 1.032. I gave the saturated tincture of the Rhus aromatica in half teaspoonful doses every four hours until she was under the influence of the remedy. A diminution of the amount of urine voided was marked from the first day. The dose was lessened and the interval lengthened from week to week, and finally, in three months, the medicine was discontinued. In the meantime strict dietary laws were observed, carefully avoiding such diet as favored the sugar-forming process in the body. She being of a scrofulous diathesis, I gave Cod-liver oil with hypophosphites for some time after having discontinued the Rhus aromatica. I have had the same result in two other cases of diabetes insipidus, which I will not give at

present, and I am at present treating a case of diabetes mellitus, a very interesting case, which I will report in a future article. In *incontinence of urine*, whether from atony of the muscular, or irritation of the nervous fibre, which prevent normal distension of the bladder, it is applicable. I have relieved several cases in which the person was unable to prevent a constant dribbling of urine—the condition rendering them offensive and uncomfortable; also, those cases in which the patient has no control over the urine whatever, will be promptly met by the action of the Rhus aromatica.

Mr. C., troubled for more than a year with an almost constant dribbling of urine, which rendered his existence miserable, disagreeable, and offensive, not only to himself, but to those around him. This condition of things, I thought, was the result of an atonic condition of the bladder; hence I gave him an ounce vial of a strong tincture of Rhus aromatica, and ordered him to take ten drops three times a day. Improvement was marked from the beginning, and after eight weeks he was able to hold his urine to normal distension of the bladder.

Ella D. had suffered from enuresis for two years. Her mother said she seemed to have little or no control over her urine at times, and that it was no uncommon thing for her to wet the bed at night and herself during the day. She further stated that she had tried almost every physician and remedy within her knowledge, but without any permanent benefit. I accordingly ordered:

℞. Tr. Rhus Aromatica, ... ℥ss.
Glycerin, ... ℥iss.—M.

Sig. Half teaspoonful three times a day, and to be careful to have her void her urine before retiring, and to have her get up immediately when she felt an inclination to urinate. As the case progressed, I ordered her to discontinue the morning dose, then the dose at noon, and finally the dose before retiring. At the expiration of three months all involuntary flow had ceased, and sufficient time has elapsed for me to pronounce the cure permanent.

The Rhus aromatica is also a valuable remedy in *hæmorrhage of the kidneys*, resulting from a diseased state of the whole system, or that which commonly precedes Bright's disease. *Hæmorrhage from the bladder, uterine hæmorrhage*, menorrhagia, and other excessive discharges, accompanied by a relaxed condition of the uterus. Of these I will speak in a future paper.

This is also a valuable remedy in the treatment of "summer diseases of children," and in *chronic diarrhœa and dysentery*. It is largely used in this part by the farmers in the form of a decoction for diarrhœa. One or two illustrations will serve my purpose here, and these are taken from a number of cases treated by me last summer.

August E. This little boy was taken early last summer with diarrhœa. Stools pale and thin, running from him like water; no particular pain or fever. He was pale and emaciated; limbs trembling; scarcely able to stand alone; skin usually cool and bowels flabby. ℞. Tincture rhus aromatica, ℥ss., three drops in water after each stool. With proper diet and care the little boy recovered rapidly.

Mr. F.; laborer; called July 17th. Stated that he was suffering from what the doctors called chronic dysentery, and that he had been in this condition for

two months. He further stated that he had averaged five stools each twenty-four hours for that length of time; sometimes copious, sometimes scant—the latter accompanied with pain. At times stools consisted largely of blood and mucus; at other times almost of clear blood. Patient was thin, countenance anxious, face expressionless, bowels flabby, skin sallow, and he was scarcely able to walk. This was a bad case, and I determined to use no other remedy until I had given the Rhus aromatica a fair trial. Under the influence of ten-drop doses of this remedy, together with boiled milk diet, my patient made a complete recovery. No other medicines necessary.

I will further state, before leaving the subject with my readers, that in my practice I have used no other preparation of the drug than a strong tincture made by myself.

I am satisfied that this remedy has such power over the atonic condition which obtains in such diseases as I have described as will render it a valuable addition to our Materia Medica; and I am convinced that in cases which have been well selected its effects will be found to be uniform and certain.

RHUS GLABRUM.

There are several varieties of this plant, as the R. typhina, stag-horn or velvet Sumach, the R. copallina, mountain or dwarf Sumach, and R. aromatica, which possess similar virtues. These must be carefully distinguished from those which possess poisonous properties. The non-poisonous species have their fruit clothed with acid crimson hairs, and their panicles are compound, dense, and terminal. The poisonous varieties have axillary panicles and smooth fruit.

We have but a fragmentary proving of R. glabrum, by Dr. Marshall, of Vermont, which, however, gives us some characteristic symptoms.

I will quote some eclectic authorities, that you may see what they think of this species.

Rafinesque, with his usual dogmatic brevity, remarks:

Roots, antisyphilitic, used in dropsy, and externally in rheumatism. Leaves, good astringent for all fluxes; gum, similar to Copal, cures toothache when put in hollow teeth. Berries used in dysentery, rheumatism, dyspepsia, sore-throat, putrid fever, hæmorrhage, gangrene. Seeds, in powder, used for piles and wounds. The juice cures warts and tetters.

Dr. King says:

Sumach bark is tonic, astringent, antiseptic. The berries refrigerant and diuretic. The bark of the root has been found useful in gonorrhœa, leucorrhœa, diarrhœa, dysentery, hectic fever, and scrofula.

His estimate of its virtues is nearly the same that he would accord to any simple astringent medicine. He does not seem to intimate anything peculiar about its physiological action.

Dr. Paine says of Rhusin:

This remedy exerts a healthful influence upon the blood and digestive organs. In many cases of obstinate diarrhœa, where the gums are spongy, the tissues soft, appetite vitiated, belly prominent, and other symptoms of a strong scorbutic diathesis, this article has been very beneficial. It is valuable in many cases of cholera infantum. In a case of sea scurvy, of malignant character, I administered ten grains of the 1st trituration with one-half grain Ferri carb., every three hours, each dose being followed by a teaspoonful of lemon syrup. This treatment was followed by prompt relief, and in a short time a permanent cure was effected.

In dysentery, resulting from the presence of zymotic poison, as hospital and camp dysentery, great benefit has resulted from this drug in combination with Gelseminum and Quinine.

In many cases of chronic ulceration of the bowels and disorganization of the tissues, resulting from typhus and typhoid fevers, I have combined Rhusin with Ptelin and Sulphate of potassa, and obtained valuable results. Externally, this remedy serves as one of the most valuable applications we possess in violent ulcerations and hæmorrhoids. Ten grains, triturated in an ounce of Glycerin, forms a valuable ointment. This mixture is quite serviceable in aphthous sore mouth, ulcerations of the throat following scarlatina and diphtheria, and in chancres and syphilitic ulcers.

Dr. Scudder remarks that the decoction is useful in profuse perspiration arising from debility; also that a free use of the bark will produce catharsis.

Dr. Coe defines the properties of Rhusin as tonic, astringent, and antiseptic. He employs it in diarrhœa, dysentery, aphthous and mercurial sore mouth, diabetes, leucorrhœa, gonorrhœa, hectic fever, and scrofula. He says:

Rhusin may justly be classed among the most valuable of the astringent tonics. It exercises a peculiar sanative influence over mucous membranes, and is invaluable in the treatment of many forms of disease affecting those surfaces. Being powerfully antiseptic, it is particularly useful in all cases manifesting a tendency to putrescency. In diarrhœa and dysentery, after the morbid accumulations have been removed by appropriate remedies, and the sthenic symptoms are measurably controlled, the Rhusin will be found of essential service in restraining and toning the action of the bowels. For this purpose it may be given in two-grain doses every two hours.

The remedial value of Rhusin is best displayed in the treatment of aphthous

and mercurial affections of the mucous surfaces. The various forms of stomatitis afford a wide range for its employment.

We know of no more useful agent in the treatment of the distressing sequelæ that sometimes follow the use of mercurials. It has been employed with advantage in hectic fever. In scrofula also, particularly those cases involving the mucous surfaces. The Rhusin is an appropriate remedy in the diarrhœa of typhoid fever, and in all cases where a putrescent tendency is manifested.

To the above medical history I will add some observations of my own.

The infusion of the root has a wide popularity among the country people for the cure of diarrhœa and dysentery, especially adynamic dysentery, when the discharges are fetid and bloody. I have known several apparently severe cases cured by this medicine, in the hands of nurses who took the cases from allopathic physicians. I never used it in such cases, being well satisfied with the success of our tried remedies.

The *berries* have a large popularity as a remedy for chronic *hoarseness*, wheezing coughs, and laryngeal asthma, so-called.

I once had a patron who was subject to attacks, every spring, of laryngeal cough with dyspnœa and almost complete loss of voice. He always resorted to a tincture of the berries. (The whole *panicle* was used—he called them "Sumach-bobs.")

The farmers are in the habit of placing these "bobs" in the mangers, or mixing them with the food of the horses that have the "heaves." A confidence in their efficacy in such cases is quite common. As heaves is a kind of asthma, probably from disease of the larynx (or emphysema), it would seem to show that the Sumach had really some specific relation to the pulmonary organs.

The only proving I have obtained is given in Vol. I. It is quite suggestive, and if verified by others will place this medicine in a higher position than it has heretofore occupied.

[The proving of Dr. Marshall, although only fragmentary, is another verification of the principle I have always contended for, namely, that a proving of any drug will show that all the cures made by physicians of other schools, with such drugs, were homœopathic cures. For example, Dr. Marshall gets "nightsweats," "ulcers in the mouth," "diarrhœa," and "hæmorrhages," and these symptoms are those which eclectics declare the Sumach will cure.]

Dr. Lilienthal reports, somewhere, several cures of very severe *occipital headaches* with the Rhus glabrum; this is one of the cases where we get a curative symptom before we do the pathogenetic.

Although this Rhus does not, in the proving, develop any of the peculiar skin symptoms, yet it seems, in this headache and some other of its symptoms, to possess some of the properties which would lead us to consider it as having the same or similar effects on certain of the nerve-centres as the Rhus tox.; in fact, I think it could not belong to the Anacardiaceæ unless it had some effects in common with other plants of the same family.

RHUS VENENATA.

This species of the Rhus has been but little used.

The old school not knowing how to administer it stand aloof from it, and our own school impressed with the idea that it is so much like the Rhus tox. there is no use of making any change.

On this point Dr. Hoyt says:

I have no doubt that its use often affects those on whom the Rhus tox. has but little influence; at least this is the case with myself, for I handle with impunity the Rhus tox., while, with the greatest degree of caution, I was violently affected with the Rhus ven. Again, in using the Rhus tox. in a case of angina, in which Rhus was almost the only remedy indicated, I had very little response from it, while from the Rhus ven. I obtained a most perfect victory over the complaint.

Another reason why it has not been used is, that we had no extensive provings of it until recently. Our school are naturally skeptical; they must know the "range" of the weapons they use. The attention of the profession was first called to this drug by the published toxical provings of Dr. P. B. Hoyt, of Danbury, Connecticut. It was made by exposing himself to contact with the aroma of the plant. He seems to have been very susceptible to its influence. (The profession will be sorry he did not leave on record a description of himself, his temperament, etc.)

The next proving was made by Dr. Burt, of Lincoln, Illinois, This proving was made by taking the drug internally. He commenced with the third dilution, and finally took the mother tincture until an ounce was taken.

The next published provings were made by Dr. F. G. Oehme, of Plymouth, Massachusetts, in 1858–59. These experiments were made both by contact and by taking the drug internally. He made two trials of it, a year apart. He has made use of it in several cases of disease with most happy results. (See his "Clinical Observations" upon *erysipelas, urticaria, prurigo, erythema, morbilli, scabies, impetigo nodosum, and furunculi.*)

He thus sums up his article:

> Before closing, we must say that there are but few medicines which will cause so many, so well-marked, and so complete diseases as Rhus vernix (ven.); but in spite of this fact, it is very little used. Perhaps some consider its properties of the same nature, but inferior to Rhus tox. This opinion is not correct. I need scarcely say that I have by no means exhausted the list of cutaneous diseases in which this species of Rhus might be used with success, as, for instance, in *eczema solare*, for which it is frequently indicated.

The first knowledge we obtained of the medicinal virtues of this plant was by hearing or seeing cases of poisoning, or being called to treat the same.

Upon some individuals or temperaments its influence is powerful. Dr. Bigelow considers that the "following circumstances have considerable influence in varying in the same person the aptitude to the reception of the poison."

First.—A warm or cold climate; in Southern more active than in Northern.

Second.—Different seasons of the year. The Rhus vernix (he means the ven.) never affects me in the smallest degree, except on very hot days in summer.

Third.—Infancy or manhood; children are more readily poisoned than adults.

Fourth.—Exposure before or after a meal. Dr. Barton, in his edition of Cullen's "Materia Medica," states that the plants more readily poison immediately after than before a meal.

Fifth.—The presence of moisture; country people generally believe that the effluvia of plants, when combined with moisture, are most apt to produce the eruption.

Sixth.—A state of increased perspiration at the time of exposure has a most powerful influence in favoring the eruption; "if my skin was perfectly dry while collecting the juice of the Rhus ver-

nix (ven.), it had not the least effect upon me." The most formidable cases in persons subject to this poison usually commence within twenty-four hours after exposure, sometimes longer, more frequently shorter. The symptoms usually begin by itching and tumefaction in the hands and face, the swelling gradually spreading over different parts of the body.

I have used it very little in practice, not because I do not consider it as valuable, or even more valuable, than Rhus tox. and radicans, but from force of habit.

In order to give you a better idea of the rise and progress of the Rhus venenata disease, I will here quote Dr. P. Hoyt's toxic proving, by which you will see that it is as perfectly homœopathic to a large number of skin diseases as the Rhus tox:

March 18th, 1857.—Wishing to prepare a tincture of this plant, I went into a swamp and procured some sprouts of the Rhus tree. I put upon my hands a pair of buckskin gloves, and carefully kept on the windward side of the plant. Notwithstanding this precaution, in one hour and a half I began to feel a most intense itching and burning of the scrotum and penis; the burning sensation was rather in the preponderance. The glans penis was very painful; slight friction relieved the itching for a moment, but not the burning.

19th.—The symptoms continue in the same severity; at 11 o'clock I scraped off the bark, using great caution to escape its poisonous effects, if possible; at 3 P.M., itching and burning commenced on the back of my right hand, between the thumb and index finger, also between the index and middle fingers.

20th.—Have been very restless all night. Awoke this morning with itching and burning in various parts of the body, particularly on the palmar sides of both wrists, attended with slight swelling; slight itching and burning of the face, with a sensation as if it was much swollen; it was red but not shining. Both hands were considerably swollen and very clumsy to use. Feeling of uneasiness in consequence of the continual itching and the burning, which were very severe, almost insupportable. P.M.—The itching and burning were somewhat relieved by exercise. The itching and burning appear on the face, particularly about the eye (right). All the symptoms were aggravated by rest. Hands, face, and wrists became covered with little pimples of the same color as the skin (red); when broken, or the points scratched off, they exude a clear, watery fluid. Fingers very stiff and much swollen, feel very much as though they had been scalded; excessive burning of the face; right eyelid swollen and stiff. The scrotum is the seat of paroxysms of severe itching and burning. Stool at 2 A.M., loose, which is unusual; had a stool early in the morning, rather loose, with pain in the bowels before the discharge. Abdomen sore to the touch and pressure.

21st.—Symptoms all increased; face much swollen, red, and covered with multitudes of little papillæ. Dizzy sensation at times, much worse in evening; wrists

much swollen, the swelling extending half way to the elbow; arms very red, and covered with innumerable vesicles, which exude a clear, watery fluid. My hands were in the same condition; the pain was excessive.

22d.—Diarrhœa at 3 o'clock, a copious stool of a lighter color than that of the night previous. Another stool at 7 A.M., not as copious, and again at 9 o'clock. Pain in the hypogastrium before every stool; have but little warning before each stool. Hands and wrists are much worse this morning; face also more swollen. The itching and burning continues with unabated vigor, and are aggravated by the warmth of the bed, and in a warm room. Mental labor increases the pains; even the recording of these symptoms aggravates them. Mouth feels rough, as though sand was under the mucous membrane, which is very red. I experienced no feelings of despondency at first. For several days previous to my poisoning, a sense of dulness and weight in head. (I notice in the proving of Rhus vernix, given in Jahr, "intolerable heaviness in the head," as a prominent symptom, which indeed was the case with me after the first week of the proving.) Evening.—My wrists and hands are still more swollen, and excessively painful. Face a little less swollen and rather less painful. Incrustations appeared to-day on the inside of my thighs, extending down one-half the length of the femur. A feeling as if from fleabites, on different parts of the body. Slight dimness of sight; lachrymation, and a livid circle under the eyes; considerable deafness, which is quite troublesome. Chills run up the back, even when warm, and in a warm room, or in bed. The rough feeling in the mouth increases, with redness; same appearance of the fauces; difficult deglutition; throat feels sore and swollen; the eruption also appeared on the gums of the upper incisors. About 9 o'clock, smarting and burning of the eyes, as though washed in Alcohol, attended by profuse lachrymation. Colic quite severe in the umbilical region. Very restless all night.

23d.—Dull feeling in the head; headache in the forepart of the head; sore head, so severe that I took Belladonna with some relief. The severity of all the other symptoms had somewhat abated, except the diarrhœa, which is more severe, and the stools of a dark-brown color. (This was the only time they were of this color, although attended with the same pain in the hypogastrium which accompanied the lighter-colored stools.) A feeling of general malaise. The glans penis is much swollen, the prepuce covered with a vesicular eruption, which extends to the inside of the thighs. During the first five days the pulse was increased from ten to twenty strokes. The poison seemed to have a considerable effect in relieving me from dyspeptic symptoms, and also benefited a chronic inflammation of my eyes.

RICINUS COMMUNIS.

The Castor oil plant is a native of Asia, where it attains the size of a tree; but in temperate climates generally, and in the United States, it is an annual plant, rarely over six feet high.

In treating of this plant and its medicinal action, I shall mention three portions, namely:

(1.) The oil. (2.) The seed. (3.) The leaves.

(1.) Castor *oil* is a very viscid, white, or pale-yellow liquid, which, when fresh and pure, is nearly or quite inodorous. It has a mild taste at first, but which becomes afterward nauseous and acrimonious. Its odor is unpleasant to most persons.

The oil is obtained from the seeds by *decoction*, by *expression*, or by *Alcohol*. The first method is pursued in the East and West Indies, and affords an acrid and irritating product. The second, which is pursued in this country, gives a bland and colorless oil. The third gives a very pure oil, which soon becomes rancid.

The oil thickens on exposure to the air. It is soluble in Alcohol and Ether. It is lighter than water.

For homœopathic uses, *i. e.*, in the attenuations, the best oil would be that prepared by *decoction*, if obtainable, for reasons I shall give hereafter.

Allopathic authorities assert that the *Castor oil is harmless*. Yet they nearly all believe that the properties of the oil are due to the presence of a minute quantity of the acrid principle of the seeds. It cannot be harmless then, for in sensitive patients, especially young infants, even a minute quantity may cause injurious effects. All allopathic writers on "Materia Medica" agree that "in overdoses it causes violent purging and vomiting." It is probable that a minute quantity of the active principle of the drug is absorbed into the blood, and exerts its specific effect, while the oily principle passes off with the evacuations, or is absorbed *as fat*. No one who has watched the effects of Castor oil in large doses can doubt that it causes *irritation* of the bowels. If a drop of Castor oil is placed in the eye, it will cause irritation, redness, congestion, and pain; when rubbed on the skin it causes redness and vesication. It certainly causes the same irritation in the bowels. But Wood says: "On account of the mildness of its action, and an especial property which it appears to have of *soothing* an irritated bowel," etc. In another place he recommends it in "inflammatory and irritative affections of the alimentary canal," because it not only removes foreign materials, undigested food, etc., but "causes a depletion of congested vessels," and exerts "an almost specific power" over the morbid state.

Canvane states that by only rubbing the navel and hypochondria with this oil,

in children whom he could not get to take any medicine inwardly, he often procured one or two loose stools. The odor alone is said sometimes to produce a purgative effect upon weak and delicate children. By repeated friction with the oil the skin is reddened, and ultimately vesicated. In the dose of one or two ounces it occasions an uneasy feeling in the stomach, and not unfrequently vomiting. But when taken in divided doses, as half an ounce, at intervals of four hours, it seldom occasions vomiting, but more generally nausea, and the bowels are apt to be moved before the second dose. The second, or even the third, may sometimes be required for this purpose. It seldom produces much griping, unless the bowels are in a morbidly sensitive condition. The action of the pulse is lowered meanwhile, a sense of peculiar discomfort is felt in the abdomen; there is also an inclination to sleep, and general debility. The evacuations which it produces are, after the first one, generaly liquid, but they contain more or less of the oil in the form of globules, and unchanged; or, as Dr. Bird has pointed out, converted into caseous flakes, or a soaplike scum, floating in the more fluid parts of the dejection. More generally it is found mixed up with the fæces as a kind of emulsion, and in some few instances it has been discharged under the form of solid tallowlike masses. Long-continued use of the oil disorders the digestion and occasions habitual nausea, with a furred tongue, etc., particularly if the oil is acrid from having been kept, or from imperfect preparation. Cullen states that when taken habitually as an aperient the dose may be gradually diminished. This statement is confirmed by Burne, who says that it acts quickly, does not produce a subsequent costiveness, and the longer it is given the less is the dose of it required. If taken daily the quantity may be gradually reduced to half a teaspoonful (Dr. Thompson says to a few drops), and yet the full effect be maintained.—STILLÉ.

This does not look as if it was so very harmless. If the odor of the oil will cause purging, why may it not act in the attenuations as a homœopathic remedy?

Wood almost hits the truth when he intimates that it has an *almost* specific action in irritation and inflammation of the bowels.

The fact is that Castor oil is nothing more than an attenuation (probably nearly the 3x) of the poisonous principle of the seeds of the Ricinus. Oil is the vehicle. It is as if the root of the Veratrum album contained an oil which, on being expressed, contained a minute quantity of *Veratria*. The two poisonous principles are very analogous.

When allopathists get *curative* effects from Castor oil they get its *homœopathic action*. Look at the facts: (*a.*) It is admitted that it may cause *irritation, pain,* and *diarrhœa*. (*b.*) They use it with good effects in *diarrhœa, dysentery,* and *enteritis*. A Dr. Thompson, quoted by Stillé, recommends it very highly for *infantile diarrhœa,* and for symptoms which have a marked resemblance to its pathogenetic effects and the effects of the seeds. He says:

It is most beneficial in the *aphthous diarrhœa* which occurs during the first year of life, especially among children who are improperly fed. It commences with sickness, frequent and griping evacuations, varying in color from greenish-yellow to dark grass-green, then becoming more liquid, and more or less mixed with slimy or gelatinous mucus mixed with blood, each evacuation accompanied with pain and tenesmus, the mouth dry and aphthous, the anus inflamed, the belly tumid and painful, the child becoming more and more feverish, emaciated, and somnolent.

I must acknowledge that before I used the Castor oil as a homœopathic remedy, I have been discomfited many times by seeing such diarrhœa cured by small doses (half a teaspoonful), repeated three or four times a day, by old nurses or impatient mothers.

For several years I have treated the diarrhœa of infants, similar in character to the above, with very small doses of the oil, and often with marked success. I give it in doses of five, ten, or fifteen drops in Glycerin or mucilage, or five to ten grains of the 1ˣ trit. of the oil with Sugar of milk, repeating the dose every few hours, as you would in giving Pulsatilla or Ipecac.

In *chronic diarrhœa*, or *chronic dysentery*, I have known of some positively brilliant cures with small doses of Castor oil. They were cases which had resisted the skill of both schools of medicine. The popular method of administration is to mix with a teaspoonful of the oil one to five drops of Laudanum for adults, or Paregoric for children. I knew of one case of dysentery which had been of three years' duration cured in a week. It was not the Laudanum which cured, for that had been tried, alone or mixed with other drugs, again and again without effect.

I have myself cured several cases of chronic diarrhœa (probably chronic mucous enteritis), even with occasional bloody stools, with fifteen drops of the oil, given three times a day.

In the treatment of *acute dysentery* allopathic physicians often give it at the onset, with excellent results. You must know that in those cases of dysentery which commence without a preliminary diarrhœa, often during obstinate constipation, that the bowels are often loaded with fæces, sometimes impacted and hardened. These do not pass off, but remain and act as foreign, irritating substances. They aggravate the local inflammation, and not only prolong the disease, but actually *prevent* a cure. One of the fundamental principles of the healing art is to remove any *foreign*

irritating substance from a diseased tissue. It is just as important to remove hardened fæces from the bowels as a splinter from a wound. A neglect of this rule has often brought our practice into dishonor. In acute dysentery, when constipation has existed, or when the bowels have not been emptied, you should evacuate the bowels by enema, or some laxative oil. Glycerin, Olive oil, or the Italian Castor oil (which is almost entirely free from the poison) may be used. You can then prescribe Mercurius, Ipecac., or Podophyllum, with prompt success. But you will get excellent results from Castor oil, if you will give it. A tablespoonful to an adult, a teaspoonful to a child, will not only remove the irritating fæces, but will act homœopathically against the disease itself.

If the dysentery has followed a diarrhœa, give the oil in drop doses, or the 1^{x} dilution or trituration. Even in the *peritonitis* of childbed, with or without enteritis, I have seen excellent effects from small doses of the oil frequently repeated. Dr. Hering says that since the interdiction of the oil, after childbirth, by homœopathic physicians, the "puerperal fever has been much less frequent in Philadelphia, where it was previously very frequent." If you will note symptoms caused by the seeds, you will observe that they resemble closely severe and dangerous cases of enteritis and peritonitis. Hence the danger of the oil.

In *cholera infantum*, the attenuations of the oil may be of value. I would advise you to give it a trial. It would be indicated by about the same symptoms as Veratrum album. It could be given singly, or alternated with Iris, Cuprum, or Arsenicum. In very young infants the oil might suffice, but if the patients were adults, or children a few years old, I should prefer the attenuations of some preparation of the seeds.

(2.) The seeds of the Castor bean are undoubtedly poisonous. If we examine the relationship of this plant, we shall not be surprised at the fact. The Euphorbias are in the same family with the Ricinus.

The seeds of the Jatropha and Curcas, two genera belonging to the same family, also abound in an acrid and purgative oil.

The oil from the seeds of *Jatropha glauca* is often sold as Croton oil, as its purgative powers are nearly as intense.

If you will read the provings of Jatropha, or consult the brief pathogenesis, you will find that the symptoms closely correspond with the poisonous effects of the Castor bean, which I will narrate. These seeds when eaten have caused dangerous and painful symptoms, and even death. Three of the beans have been known to cause the death of a man. The symptoms do not usually come on until from two to five hours after the ingestion of the poison, when severe abdominal pain is felt, and is accompanied by violent vomiting and purging, which after a time may become bloody. This purging soon ushers in a state of collapse, with or without severe muscular cramps, with cold sweating skin, contracted features, thirst, restlessness, small, rapid pulse, and sometimes the general appearance of Asiatic cholera.

After death, intense redness and even abrasion of the small intestines are found.

As the oil probably derives its purgative action from the principle which renders the seeds themselves so harsh and even poisonous, it may be well to describe their effects more particularly. M. Mialhe proved that an emulsion made with the kernels of the seeds is violently emeto-cathartic in the dose of one hundred and fifty grains (from seven to ten seeds), and that even a tenth part of that quantity produces both vomiting and purging. He hence inferred that the active principle of the seeds is yielded but slightly to those varieties of the oil which are obtained by pressure alone, without heat. This is more fully proved by instances such as the following: Giacomini relates that when a child he experienced a violent attack of vomiting and protracted exhaustion from eating nine or ten of the seeds. Bergius records the case of a man in full health who ate a single seed of Ricinus, which, however, left an acrid taste in his mouth. Early the next morning he was seized with violent vomiting, which continued alternately with purging throughout the entire day. Lauzoni saw a young woman attacked with violent cholera morbus, and in excruciating pain in the bowels, from eating three of the fresh seeds. Dr. Taylor records a fatal case of poisoning from this cause. Three young women ate of the seeds, one about twenty of them, another four or five, and a third two of them. Upon the two latter persons the effects were those of a violent cathartic, but the first was seized with vomiting and purging,

and looked like one in an attack of malignant cholera; the skin was cold, pale, and shrunken, there was pain in the abdomen, and the mind was in a drowsy, half-conscious state. The dejections consisted of bloody serum. No reaction took place, and death occurred within twenty-four hours. On examination, the gastro-intestinal mucous membrane was found to be abraded and inflamed. A soldier in Algeria is said to have died from eating only three Castor oil seeds. The whole intestinal mucous membrane was found after death coated with blackish blood. The lining membrane of the stomach was somewhat reddened and softened.

A case is related by Bergius where only *one* seed produced symptoms of poisoning, namely, nausea, vomiting, and diarrhœa.

After twenty seeds, gastro-enteritis and death, preceded by convulsions and general collapse.

A young and strong man, after eating two grams of the residue of the seeds from which the oil had been expressed, was seized with such violent vomiting that his life was in danger.

Devergie states that two patients who had taken each an ounce of Castor oil died in three hours (!).

From these quotations it will be seen that the seeds of the Castor plant contain a poisonous principle analogous to Veratrum album, Jatropha, Iris versicolor, and perhaps Arsenicum and Cuprum.

The following case of poisoning by the seeds shows something worse than mere enteric inflammation, for they appeared to cause *albuminous urine* and *jaundice:*

Bean, a sergeant in the seventh company of engineers, enters the hospital at half-past five, July 10th, 1871. He ate the same day, in the morning, some *Ricinus* seeds as a pugative. The seeds were perfectly ripe, dry, and gathered in the fall of 1869. As he did not find the taste very disagreeable he ate seventeen of them. No accident happened immediately after eating them, and he took some beef-tea with appetite. Three or four hours afterwards he passed several loose stools, and suffered soon afterwards from pyrosis, cramps in the stomach, and nausea, followed by vomiting, which contained fragments of the seeds and drops of oil floating on it. The stools became at the same time more numerous and copious, were passed without tenesmus or colic, formed of serous liquid mixed with mucus.

About 4 P.M. the diarrhœa became incessant, with cramps and chilliness; at 5½ P.M. he entered the hospital.

Pathology.—Present state: Pale face, the forehead covered by cold sweat, and features drawn; the eyes are convulsed and drawn upward in the orbita, the conjunctiva injected, and copious lachrymation; the pupils only moderately dilated; pulse normal in frequency, but so small that sometimes it can hardly be felt at the radial artery. Intelligence perfectly clear; patient complains of headache, vertigo, buzzing in the ears, and a sensation as if a bar laid over his stomach, with profound anguish. Burning thirst; pyrosis, nausea, vomiting; the vomited matter is fluid, lightly colored by some bile, and holds some glairy filaments suspended; epigastrium very sensitive, and the *pains radiate* toward the navel and hypochondria; neither light nor strong pressure aggravates the pain, at the same time the patient feels a sensation of violent constriction in the intestines; the diarrhœa becomes colliquative, and the stools look like those in cholera. Complete anuria since 10 A.M.; voice very veiled; profound adynamia; it takes two persons to hold the patient.

The time for antidotes had passed, and the only indication remained to combat the coldness, the muscular contractions, the stoppage in the circulation—in one word, to remove the pseudo-choleraic symptoms consecutive to the enormous loss of water the patient had sustained.

Frictions with *Camphor* were ordered, sinapisms to the thighs, and hot flaxseed tea given in large quantities. Antispasmodics could not yet be given on account of the constant vomiting.

Heat returns; but the chief physician, Dr. Peray, orders, on account of the vomiting, iced drinks, an antispasmodic potion, emollient injections in order to empty out the last traces of the poison, poultices on the abdomen, and continued frictions. The vomiting lasts till 3 A.M.

July 11th. Some fever, tongue hot and dry, anorexia, pyrosis.

Vomiting again; the epigastric and abdominal pains, as well as the diarrhœa, continue; more cramps; extreme lassitude; absolute anuria. At 10 A.M. he passes a small quantity of dark-colored, thick, and highly *albuminous* urine.

July 12th. Fever and diarrhœa continue, cramps in long intervals; severe headache; urine still scanty, with large precipitates, by heat or *Nitric acid.* The same treatment.

July 13th. Pulse normal; face slightly congested; tongue white; no appetite; pyrosis; vomiting and abdominal pains; moderate diarrhœa, without tenesmus or colic.

Icterus fully pronounced. Urine still very albuminous.

July 14th. Some diarrhœa, and great lassitude.

July 15th. Only two stools; appetite returns; urine ceases to be albuminous; discharged.

An analysis of the seeds shows they contain an alkaloid, *Ricinin*, which is soluble in water and alcohol; three acids, *Ricinic acid*, *Elaiodic acid*, and *Margaristic acid*, all very *acrid* and soluble in alcohol; also a *volatile* principle which passes off by heat, and while bruising or triturating the seeds.

The method of making the oil by decoction doubtless extracts the alkaloid, which is probably the most virulent quality which the seeds possess. It is probably this alkaloid which causes a large portion of the choleraic symptoms. The acids are expressed with the oil, and assist in evolving severe symptoms.

For homœopathic preparations the oil obtained by decoction would be the best, or any oil highly colored and of acrid taste; this might be called "*Oleum ricinus.*"

The preparation for homœopathic use in cases presenting *choléraic* or *enteritic* inflammatory symptoms, corresponding with the poisonous symptoms, should be made from the whole seeds bruised, or, what would be better, from the residue after expressing the oil without heat or Alcohol, as is the plan adopted in this country. This should be called "*Tinctura ricini sem.*" This tincture should be made with *hot* water and Alcohol, in proportion of one part of the former to three of the latter.

The therapeutics of the *Tinct. ricinus seed* has yet to be written. Dr. Emery, of Lyons, France, introduced the Ricinus into homœopathic practice. He recommended it in diseases of the liver and intestines. I have not been able to find any of his clinical reports except one, in which he claims to have cured or relieved gallstone colic with Ricinus[8]; a rather dubious report, I imagine.

I am amazed that Hahnemann, or some of his contemporaries, did not institute provings of the seeds. They must have been aware of their poisonous action. Knowing its botanical relationship, and the almost universal use and abuse of the oil, it is surprising that Ricinus did not, in their hands, become a polychrest. It is certainly as capable of occupying such a place as Euphorbia, Jatropha, Croton tig., or Veratrum.

It ought to be useful in *cholera Asiatica*, cholera morbus and infantum. It will doubtless prove a specific in many cases of *mucous enteritis*, in the forms of *diarrhœa* and *dysentery*.

One of the cases just quoted proves it to be homœopathic to *choleraic attacks*, with *albuminuria*, and probably *urœmia*, a dangerous form of disease, especially in infants; also in *jaundice* supervening upon cholera.

(3.) *The Leaves.*—The medical history of the leaves of the Ricinus

is very interesting. The first mention of their use was by Dr. J. O. McWilliam, in 1850. While in the Cape de Verde Islands, in 1846, he learned that in cases of emergency this remedy could be successfully applied to *increase the flow of milk in nursing women, when it was scanty or tardy in appearing;* also, that in cases of emergency it would produce milk in the breasts of women who are not childbearing, or who even have not given birth to or suckled a child for many years.

In cases of childbirth, when the appearance of *milk is delayed,* a decoction is made by boiling a handful of the leaves of the plant ("Bofareira," as it is there called) in six or eight pints of water. The breasts are bathed with this decoction for fifteen or twenty minutes. Part of the boiled leaves are thinly spread over the breasts, and allowed to remain until all moisture has been removed from them by evaporation, and probably in some measure by absorption. This operation of fomenting with the decoction, and applying the leaves, is repeated at short intervals until the milk flows upon suction of the child, which it usually does in the course of a few hours.

In cases where milk is required to be produced in the breasts of *women who have never given birth to a child, or not suckled one for years,* the mode of application is more thorough. Two or three handfuls of the leaves are taken and treated as before. The decoction is poured, while yet boiling, into a large vessel, over which the woman sits so as to receive the vapor over her thighs and generative organs, cloths being carefully tucked round her so as to prevent the escape of the steam. In this position she remains for ten or twelve minutes, or until, the decoction cooling a little, she is enabled to bathe the parts with it, which she does for twenty minutes more. The breasts are then similarly bathed and gently rubbed with the hands, and the leaves are afterwards applied to them in the manner before described.

These operations are repeated three or four times a day for ten days, when a child is put to the nipple, and in the majority of instances it finds an abundant supply of milk.

Women with well-developed breasts are most easily affected by the plant. When the breasts are small and shrivelled, it is said to act more upon the uterine system, bringing on the menses if

their period be distant, or causing immoderate flow if their advent be near.

Dr. Tyler Smith experimented with the leaves, and was successful in causing the flow of milk in many cases.

Dr. Rauth pronounced a favorable judgment upon the value of this medicine as a *galactagogue.* He was the first to administer it internally in the form of decoction, and afterwards in the tincture and extract. Subsequently, Dr. Gilfillan produced equally striking effects by teaspoonful doses of a fluid extract of the leaves. Lately, Dr. Woodbury, of Boston, and many other physicians (of our school) have used the fluid extract or tincture with good results in *scanty milk-flow, suppression of milk,* and when the *milk was of poor quality.*

I have been informed by nurses that Castor *oil* rubbed on the breasts, warm, will hasten or increase the flow of milk. It is supposed that the oil administered internally, in small doses, on the fourth day after confinement, favors a free flow of milk.

I have used the leaves as above recommended, and prescribed the extract internally in *suppressed* milk in many cases, but they were nearly all cases of suppression from childbed fever, convulsions (puerperal), or when the milk had long ceased to flow. I have not succeeded well in but one case. I suspect, however, that my directions were not followed as thoroughly as necessary. You must not expect uniform success with the so-called *galactagogues. Coriander* will increase and enrich milk in some women, and not in others. *Electricity* will prove successful in some cases, and fail utterly in as many. Assafœtida is often efficient.

Amenorrhœa has been successfully treated by the same plan as before narrated. It is not known if its internal administration will restore the menses. *Scanty menstruation* has also been removed in the same manner.

In Dr. Tyler Smith's cases its external application caused *swelling of the breasts, throbbing and other pains in the breasts, swelling of the axillary glands, with pains running down the arms. Pains in the back, like after-pains, were caused in every case. Leucorrhœa was increased. Serous discharges from the breasts became milky, and the menses came on too soon.*

I have somewhere read that a decoction when administered caused similar symptoms.

The dose of the fluid extract is 10 or 20 drops every two or four hours, the tincture a little more, and a decoction in wine-glassfuls.

Dr. Hering writes me that East India physicians allege that the leaves cause ulcers in the mouth and throat, painful pustules and abscesses on the skin, and are used in swelling of the testicles and ankles, also for pain in the hip-joint with stiffness.

The seeds and leaves need careful and thorough provings on the healthy, in order to develop characteristic symptoms, so that the indications can be distinguished from those of its near allies, namely, Jatropha, Croton tig., Iris ver., Veratrum album, Arsenicum, Euphorbia, etc. Meanwhile I urge you to test Ricinus sem. in practice, and report the results to our various periodicals.

ROBINIA PSEUDO-ACACIA.

The fragmentary proving of Dr. Burt may be considered reliable, and a few of the symptoms from Houatt. The pathogenesis of the latter, however, is too extensive, too tragic, and too much like his other provings, to be true.

It seems to be an analogue of Calc. carb., Iris vers., Pulsatilla, Magnesia carb., and Rheum. It produces pre-eminently an acid condition of the secretions.

It has been found curative in *sick headache* with *acidity of the stomach*, sour eructations, and *vomiting*. In *dyspepsia*, manifesting itself at night and preventing sleep. In *heartburn* and acidity of the stomach at night on lying down, also in the *sour stools* of infants, with sour smell from the body, and the vomiting of sour milk.

I think I have somewhere seen it recommended in some varieties of *typhoid fever*, *cholera infantum*, and *cholera morbus*.

RUMEX CRISPUS.

This plant has been in common use among physicians and laymen for hundreds of years It has a reputation which has outlasted many more powerful drugs.

Allopathists have decreed the Rumex crispus to be alterative, tonic, astringent, and discutient. Dr. Joslin comments on the allopathic use and statements concerning this medicine. He remarks:

Its only definite and well-ascertained property was its power of curing the itch, when administered internally and applied externally. This was as well known to the laity as to the profession.

He goes on to say that the allopathist confounds the medicinal properties of the different varieties of Rumex, and would have us consider their effects nearly the same. Ignoring, as they do, the necessity of *proving* each drug, in order to ascertain its true action, they grope in the dark. They reverse the true order of investigation. He remarks: "But these are not specially the fault of the professor (Wood); they are almost inseparable from the school." Dr. Wood remarks:

We have placed *together* the *three* officinal species of Dock (*i. e.*, R. aquaticus, R. britannica, and R. obtusifolius), because their virtues are so nearly alike that a separate consideration would lead to unnecessary repetition. All the *other* species may be used indiscriminately with those which are considered officinal. The medical properties of Dock-root are those of an astringent and mild tonic. It is also supposed to possess an alterative property, which renders it useful in scorbutic disorders and cutaneous eruptions, particularly the itch. It is said to have been useful in scrofula and syphilis. The roots of some species unite a laxative with a tonic and astringent property, resembling Rhubarb somewhat in their operation.

Dr. Paine, in his judicious compend of the allopathic Materia Medica, comes to the conclusion that Rumex is similar, but inferior to Rhubarb. Our school, after a comparison of the provings, would consider the difference to be more qualitative than quantitative. The eclectic school estimates the Docks more highly than their allopathic brethren. Jones and Scudder, in their "Materia Medica," say:

The Dock appears to exert its silent, alterative action upon the constitution in many *chronic cutaneous eruptions*, as *scabies*, the different varieties of *herpes*, *syphilis*, when it has assumed a constitutional form, attended with an *ulceration of the fauces*, eruption or ulceration upon the surface; also in Mercurio-syphilitic disorders, Mercurial cachexy, *cancerous tumors or ulcers*, *scrofula*, whether manifested by a general depravation of the system, *enlarged glands*, or foul and indolent *ulcers*, or

in any other form of ulcer, especially if dependent upon any constitutional taint. In *caries, necrosis*, or other morbid conditions of the osseous system; in *scurvy* or *scorbutic affections*, and in numerous other abnormal states, its resolvent, depurative, and detergent qualities render it an excellent auxiliary and corroborant. And the agents desired under this class (alterative) are either associated or alternated with other remedies, and *not relied upon as individual curative agents.*

This last sentence contains the elements of all the errors of allopathic therapeutics. They mix a number of drugs together and then affirm certain curative properties of *one* of these, because the *compound* seemed to cure. It is in this manner that the estimate of Rumex, quoted above, is made up. It is generally given in combination with Stillingia, Iodide of potassa, or some other drug. Nearly all the curative effects above named may be due to the latter medicines. It is also recommended for "dyspepsia, debilitated states of the intestinal canal, diarrhœa, and dysentery."

Dr. J. Williams says: "Boiled in milk and taken in *hæmatemesis* it is an infallible remedy." It is said to be useful as a wash or gargle, in spongy states of the gums, *ulceration of the mouth*, throat, etc. How much of value there may be in the above statements will be shown by the provings. To the late lamented B. F. Joslin, M.D., of New York, the homœopathic profession owes the valuable and accurate provings of this medicine. He first called the attention of the profession to it in the first and second volumes of the "Philadelphia Journal of Homœopathy," afterwards in other journals, and finally in the "American Homœopathic Review," in which he published the verified symptoms of Rumex crispus. The original provings and clinical contributions were made by some of the best men in our school, namely, Drs. Joslin, Sr. and Jr., Bowers, Bayard, Kellogg, Houghton, Payne, Rhees, and others. We may implicitly rely upon the accuracy of their observations. I cannot omit, in this place, to render my tribute of respect and reverence for the genius, virtues, and sterling qualities of Dr. B. F. Joslin. He was one of those representative men of our profession and school, ranking with Hartmann, Hempel, Neidhard, Hering, and a few others, whose "mighty footsteps" will ever

"Echo down the corridors of Time."

Among his many excellent qualities, the most to be admired

were his *industry, honesty,* and consistency. In the domain of materia medica and therapeutics, no man has done more in this country. He has given us some exact and reliable provings, and a volume on "Epidemic Cholera," which is one of the finest monographs ever published in our school. He was rigorously *honest,* in that he allowed no prejudice to sway his judgment, but examined carefully the testimony relating to drugs, from any and all sources, selecting the reliable, no matter from what source it emanated or how obtained. He also recorded his observations with that truthfulness and candor which commands our highest regard. Although a stanch champion for the "high potencies," he did not allow his enthusiasm to degenerate into bigotry, or his preference into prejudice. He was thoroughly *consistent,* always relying upon the higher dilutions, even in cholera, and his success in their use was something astonishing, but probably owing to his carefulness in selecting his remedies. We can admire such a man, as much as we can despise others who, constantly harping upon the highest potencies, habitually resort to the lower, and even cruder drugs. For myself, allowing the largest latitude, I can sincerely respect the consistency of a Joslin, even though I cannot adopt his practice altogether.

According to Dr. Joslin's enumeration of "verified symptoms," and clinical experience, the Rumex crispus is closely analogous to Sulphur, Phosphorus, Causticum, Calcarea, Mercurius, and Spongia. In fact, it has many symptoms which are to be found in the pathogeneses of these remedies. This may partly be accounted for by a fact too little heeded by our school, namely, that the chemical analysis of a plant is some clue to its pathogenetic effects. Rumex crispus contains, besides starch, mucilage, lignin, etc., *Sulphur,* and various salts, among which are the Phosphate of lime.

Here we have *three* of our best remedies represented indirectly in the Yellowdock, namely, Calcarea, Phosphorus, and Sulphur. Its use in the old school for diseases of the skin and other obstinate affections, all of which are covered by the symptoms of the medicines above named, and its undoubted success, should have led us, without any proving, to decide nearly the sphere of action of this plant. The published provings, however, show its real properties, and prove the reliableness of the above assertion. The

provings were made with the mother tincture, lower and higher dilutions; the thirtieth causing the same or similar symptoms that were aroused by the crude drug.

Its following characteristics are thus specially enumerated by that careful observer, the late Dr. Joslin:

The left chest has more verified symptoms than any other region; they are generally sharp pains. The other regions which afford a considerable and nearly equal number of symptoms, as compared with each other, are the head, stomach, abdomen, and inferior extremities. The symptoms of the head are, generally, dull pains in the frontal region. The symptoms generally appear to be either in a mucous membrane or in a muscular locality, and to be about equally numerous in both. I leave it for others to decide whether the latter are neuralgic. They present about the same number as the former.

Conditions.—Headache worse *on movement;* sensation of weight, or of a hard substance in the stomach or pit of the stomach *after a meal;* liquid diarrhœa, evacuation *in the morning;* pain in the chest when *in bed at night;* unquiet sleep, with dreams of danger or trouble, *early in the morning;* itching of the skin, worse on uncovering and exposing it to the air, especially on going to bed in the evening, or at night.

No clinical records of cures of skin diseases, treated with Rumex, have yet appeared in our school; but Dr. H. M. Payne, while experimenting with Rumex, got the following notable symptoms from the crude tincture: "While undressing, and for some time after, considerable *itching of the surface of the lower extremities.*" This occurred several nights, when he says:

There is no appearance of an *eruption* until after irritating the skin by scratching, and then rather a diffused redness, which soon disappears. Frequent scratching of the surface has produced a number of little sores (which, however, readily heal) on the calves of the legs and about the knees, especially the posterior surfaces; the rash is not usually troublesome until after the surface is exposed to the air while undressing at night, or on getting up in the morning; the warmth of the bed soon relieves the itching.

The contrary occurs in most cases of skin diseases, the itch especially; also in the provings of Mercurius the opposite obtains. Many persons are troubled with a peculiar irritability of the skin, like the condition above described. Exposure to air, working in water, scratching, wearing flannel or new cloth, will get up considerable irritation, and even cause *erythematous* and other *eruptions.* In such cases the Rumex will probably form an admirable remedy. I would also suggest its persevering use in those

eruptions which seem constitutional, and which when suppressed, or not appearing upon the surface, are replaced by cough, hoarseness, and other lung symptoms. May not a peculiar irritation which Rumex causes in the bronchial mucous membrane be analogous to the condition of the skin noted above?

It has been used with alleged success in *dyspepsia.* Many of its symptoms would seem to indicate its applicability in some forms of *gastric derangement.* Dr. Joslin reports the following cases in the "Review:"

A young lady complained of shootings from the pit of the stomach into the chest in various directions; sharp pains in the left chest; dull aching in the forehead, and slight nausea; ordered her to take Rumex 30th, morning and evening. She called next day; all her symptoms had been removed by a single dose, and her appetite, which had been defective, improved; having eaten an unusually full dinner, there is a partial return of the shootings; gave Rumex 30th, evening and morning; there was no further complaint.

A lady, about fifty years of age, who had suffered about three weeks with pain in the pit of the stomach, aching in the left chest, flatulence, eructations, pressure and distension in the stomach after meals, was permanently cured of these dyspeptic symptoms in two or three hours by one dose of Rumex 200th.

A young lady has a sensation of fulness and pressure in the pit of the stomach, extending up towards and to the throat, and afterwards carried down again towards the stomach when she swallows, and then rising again to the throat. This curious alternation has been observed in the proving of Rumex. She was cured by Rumex 200th.

A gentleman, not accustomed to the use of tea, took a cup of it, very weak, of the black kind; then followed aching in the pit of the stomach, and aching and shooting above it in the chest, at and especially on each side of the lower end of the sternum. The symptoms were removed in a few minutes by one dose of the Rumex 30th.

It is considered by allopathists as similar in its action to Rhubarb, and has been used by that school in diarrhœa and dysentery. It is homœopathic to some forms of *intestinal disorder.* Dr. A. E. Small informs me that at one time he found it very useful in the bowel complaints of children. Dr. C. Dunham, writes (Am. Hom. Review, vol. ii, p. 533):

I have noticed in one case the cessation of a brown, watery *diarrhœa* after the administration of Rumex. A boy of five years had brown, watery diarrhœa, chiefly in the morning, having five stools from 5 to 9 A.M., attended with moderate griping pain in the lower part of the abdomen; this continued several days, notwithstanding two prescriptions which I made for it. Observing that the boy had

a cough which presented the characteristic features of the Rumex *cough*, I gave that remedy, and both diarrhœa and cough were speedily cured.

A lady, about the turn of life, had diarrhœa in the morning, four evacuations between 6 and 10 A.M.; fæces very thin; evacuation painless; nausea on movement in the night, preceding the evacuations; mouth dry, tongue slightly coated yellow; the day previous had dull pain on the right side of the sternum; sharp pain on the left. Gave Rumex 30th, in solution, once in three hours. The next day all the symptoms were removed.

Diarrhœa in the Morning with Cough.—A lady, about fifty years of age, has had diarrhœa every morning for four days; the evacuations profuse, offensive, and thin, and have even become watery; she is also suffering from a cough, excited by a sensation of tickling in the throat-pit. It is usually dry, but when expectoration takes place, this is tasteless; the cough shocks the stomach, and is attended with a sensation of excoriation in the chest; it keeps her awake at night. Rumex 30th, every four hours, on the 30th of March. In the evening the cough was immediately and decidedly improved, so that she slept all night. Next morning she awoke with the most severe headache she had ever suffered; it was a continuous aching in the temples, forehead, and eyebrows, and lasted all the morning; the cough and diarrhœa were removed without any other medicines. All the above symptoms, except the fetor of the fæces, have been observed as pathogenetic of Rumex.

A mother and daughter, aged respectively about thirty-five and twelve years, had for four days a "diarrhœa in the morning with cough." The *diarrhœa* occurred in the latter half of the night and early morning—three to five evacuations, which were liquid, dark, copious, and offensive. The evacuations were preceded by a *violent dry cough*, provoked by a *tickling* in the *throat-pit*, and sensation of excoriation under upper end of sternum; *nausea* on movement; severe griping in the lower part of the abdomen; tongue slightly coated, and of a yellowish tinge. Having with me Rumex c., 2d dil., I gave to each one drop in a teaspoonful of water, the dose to be repeated every two hours, till 9 o'clock P.M., discontinued during the night, and resumed in the morning, to be taken as on the preceding day, and so on till I saw them. Called again in two days, and found that after the first dose the diarrhœa had disappeared, and seemingly taken with it the dry cough and its accompaniments, the nausea and the abdominal pain. Appetite had returned and convalescence was established.

Was called to see a lad about fourteen years of age, who had been ill already ten days. Had aching pain of the scalp, darting pain of the neck, the integument of which was reddened and the muscles swollen and rigid; lancinating pain of a shifting character, affecting the walls of the chest; a dull or pungent pain affected the hips and extremities, all of which were aggravated by pressure or movement; pulse 100 and upwards; skin hot and dry; thirst considerable; dry cough excited by a sensation of tickling in the sternal extremity of the trachea, which was annoying at night; several thin, brownish, free evacuations towards morning, preceded by nausea on moving, and cutting pain in the lower abdomen; tongue coated and yellow, with bitter taste.

Under the use of Aconite, Bryonia, and Mercurius, the fever, rheumatism, and abdominal pain were removed in due time. But there remained a slight disposition to scrape, and the occasional expectoration of a little whitish tenacious

mucus; a painless diarrhœa; the evacuations now having a considerable consistence, were dark and offensive. After making two or three prescriptions for the diarrhœa without avail, I gave Rumex c., 2d dec. dil., a drop every two hours in a teaspoonful of water—the remedy to be omitted during the night. The patient took the same dose every three hours on the second and third days. After the first dose he had no evacuations from the bowels for three days, and his laryngeal and tracheal irritation passed off at the same time. On the third day, after taking the first dose of Rumex c., he had a good appetite and was fairly convalescent.

The Rumex crispus seems to have a specific affinity for the *laryngeal* and *bronchial* mucous membrane. The recorded clinical experience with this remedy is quite extensive. Dr. C. Dunham makes some valuable observations concerning its therapeutical properties. I copy a portion of his article (see "American Homœopathic Review," vol. ii, p. 530):

I have used the Rumex chiefly in *acute catarrhal affections of the larynx, trachea, and bronchi.* In these cases it seems to me to present a close analogy in its action to Belladonna, Lachesis, Phosphorus, and Causticum. Without assuming to present an exhaustive analysis of the action of Rumex on the respiratory organs, I proceed to state the indications for its use to which my studies of it have thus far led me. Rumex diminishes the secretions, and at the same time exalts, in a very marked manner, the sensibility of the mucous membrane of the larynx and trachea, exceeding in the extent of this exaltation any remedy known to us. The cough, therefore, is frequent and continuous, to an extent quite out of proportion to the degree of organic affection of the mucous membrane. It is dry, occurs in long paroxysms, or, under certain circumstances, is almost uninterrupted. It is induced or greatly aggravated by any irregularity of respiration, such as an inspiration a little deeper or more rapid than usual; by an inspiration of air a little colder than that previously inhaled; by irregularity of respiration, and motion of the larynx and trachea, such as are involved in the act of speech; and by external pressure upon the trachea, in the region of the suprasternal fossa. The subjective symptoms are, rawness and soreness in the trachea, extending a short distance below the suprasternal fossa, and laterally into the bronchi, chiefly the left; and tickling in the suprasternal fossa, and behind the sternum, provoking the cough. This tickling is very annoying and very persistent, and is often but momentarily and sometimes only partially relieved by coughing. The cough occurs chiefly, or is much worse, in the evening after retiring, and at the time the membrane of the trachea is particularly sensitive to cold air and to any irregularity in the flow of air over its surface; so that the patient often covers the head with the bedclothes to avoid the cold air of the apartment, and refuses to speak, or even to listen to conversation, lest his attention should be withdrawn from the supervision of his respiratory acts, which he performs with the most careful uniformity and deliberation, and all in the hope of preventing the distressing tickling and the harassing cough which would ensue from a neglect of these precautions. I have frequently witnessed

this state of things during the last three years, and have invariably given prompt relief with Rumex. In the group of remedies in which I have placed Rumex (along with Bell., Lach., Phos., Caus.), it stands pre-eminent in respect to the extreme sensibility of the tracheal mucous membrane. All of these remedies produce symptoms identical in kind; the characteristic of each is to be found in the relative degree in which each symptom is pronounced in the different remedies, quite as much as in the possession by any one of them of symptoms not produced by the others. Thus Belladonna, Lachesis, and Rumex produce each a dry cough, induced by tickling in the larynx or trachea, and provoked by deep inspiration, by speaking, and by external pressure on the larynx or trachea. The cough of each is spasmodic and long-continued, and is worse at night after retiring; but apart from the fact that Belladonna and Lachesis act more upon the lower part of the trachea, we observe that in the case of Lachesis, the slightest external pressure on the larynx or trachea produces violent and long-continued spasmodic cough; the patient cannot endure the least constriction in that region, not even the ordinary contact of his clothing. There is, moreover, a sense of fulness in the trachea, and a very painful aching in the whole extent of the os hyoides. In the case of Belladonna not only is cough produced to a moderate extent by pressing upon the larynx, but soreness and pain are experienced, with a sense of internal fulness and soreness, which at once suggests the presence of acute laryngitis submucosa. In Rumex, on the other hand, there is no sensibility, strictly speaking, of the trachea, but simply such an instability of the mucous membrane that cough is produced by the change of position induced in that membrane by external pressure on the trachea. As regards the extent and intensity of this symptom, Rumex holds a lower rank than the other remedies named. But the irritability of mucous membrane by virtue of which cough is induced by hurried or deep inspiration, or by speaking, while it is common to Bell., Lach., Rumex, and Phosphorus, is produced in the most exalted degree, as we have already seen, by Rumex, which, as regards this symptom, takes first rank. A sensation of rawness or roughness in the larynx, trachea, and bronchia is produced by each of the four remedies above named, but the *locality* and the *degree* in which it is produced vary in such a manner as to serve in some measure as a characteristic of each. It is most marked in Phosphorus and Belladonna, less prominent in Rumex, and least of all in Lachesis. In Belladonna and Lachesis it is most marked in the larynx; indeed it is almost confined to that region. Rumex produces it in the trachea and upper part of the bronchia, while Phosphorus induces it in the whole mucous tract, from the larynx to the smaller bronchia and bronchi; and, moreover, in the Phosphorus proving, this "rawness" of the air-passages is accompanied by a no less characteristic sense of weight and constriction across the upper part of the thorax, which indicates an affection of the finer air-tubes and of the air-vesicles, of such a character as seriously to impede the function of respiration. In considering this last symptom, we must mention Causticum, also, which produces "rawness," extending the whole length of the sternum.

All five remedies, again, produce *hoarseness;* Phosphorus, Causticum, and Belladonna most eminently, Rumex less decidedly, and Lachesis in a still less degree. As regards complications, Belladonna and Lachesis apply especially to

those which involve the fauces and pharynx, and are acute—the one of a sthenic, the other of an asthenic character; Phosphorus those of the pulmonary tissues of a definite inflammatory character, and Rumex to certain affections of the lungs and their envelops, of which their nature is not clearly defined in the proving. They are indicated by pains, generally subacute, in the upper part of the lung, near the clavicle and axilla, and more frequent in the left than in the right lung.

The following case from my clinical record will illustrate the character of the *Rumex cough:* M——, aged twenty-two, of feeble constitution, strumous, subject for several years to subacute rheumatism, has had a severe cold for several days, and is now confined to her bed. The pulse is quick, not hard, one hundred and ten; skin moderately hot and dry; face somewhat flushed; respiration embarrassed, not so much by any constriction of the chest as by the violent and long-continued cough which follows any attempt to make a full inspiration. A physical examination of the chest reveals no abnormal condition. The patient complains of roughness and soreness in the lower part of the trachea and behind the upper third of the sternum, much more perceptible when she coughs. The cough is dry, slightly hoarse, very violent, and fatiguing to the patient. It is provoked by a tickling in the suprasternal fossa, is induced by pressure on the trachea in that region, and especially by talking, and by deep inspiration, or by the inspiration of cool air. This irritability of the trachea increases very remarkably after 7 P.M., so that the patient suffers exceedingly from the constant tickling and violent cough. Can prevent it only by respiring with very great caution and deliberation, by avoiding all distractions of speech and conversation, and finally she draws the bedclothes over her head, in order to avoid inhaling the cool air of the chamber. This patient states that she has frequently had such coughs as this, and they have proved very obstinate, although under skilful homœopathic treatment. I gave Rumex 12th, in solution, a teaspoonful every two hours. After the second dose there was complete relief. The next evening a very slight disposition to cough. No further symptoms. I supplied the patient with Rumex 30th, and advised her to use it at once on the occurrence of such a cough, and I am informed that she always succeeded in subduing the cough within twelve hours.

The following cases in the practice of Dr. P. P. Wells, of Brooklyn, were communicated in a letter to Dr. Joslin, some years since. We regret that these are the only cases of Dr. W.'s that we can at present report, but hope that at some future time we shall be able to publish more, as the doctor's experience with this remedy has been very satisfactory.

Mrs. —— had been subject to eight miscarriages, all in the early part of pregnancy, which in each case was early attended with dry, *shaking, spasmodic cough*, in *paroxysms* of great violence, which was regarded by herself and friends as instrumental in producing the *abortions*. At the beginning of the ninth pregnancy she came to Brooklyn to be under homœopathic treatment. She had her *cough*, which was *very dry, harsh, loud, shaking, worse at night*, preventing sleep, excited instantly by pressure on the trachea. The cough was relieved promptly by Rumex crispus 30th. The following marked and rather important group of symptoms were relieved promptly, in the treatment of the case of our friend D.,

by Rumex 200th, Lehrman's preparation. Thinking a knowledge of the fact might interest you, to whom we are indebted for our knowledge of this interesing drug, I send it:

The cough begins with tickling behind the top of the sternum, and sometimes in paroxysms of from five to ten minutes' duration. Trachea sore to outward pressure; feels excoriated through its whole extent, as do also the whole fauces; cough excited by pressure on the throat-pit; cough is violent, with scanty, difficult expectoration; shocks the head and chest, as if the head would fly in pieces, and he feels as if he might raise blood at any minute. He is greatly exhausted after the paroxysms of coughing; head aches during the cough. You have the group above in the order as written down for me by his brother, and upon which I prescribed the medicine, which was followed with the happiest results.

Dr. J. M. Rhees reports several cases of *aphonia*, one a

Case of three months' standing, with sore throat during deglutition; posterior surface of pharynx irritated, and in places excoriated; edges of soft palate and uvula red and somewhat swollen, and covered with an eruption of minute red pimples; slight, hacking cough, produced by a tickling in the larynx and upper part of the trachea. Under Carbo veg., Causticum, and Mercurius she grew worse; her cough became almost constant; tickling at the root of the tongue; Hyoscyamus and Rhus were given, but gave no relief. Rumex 6th was then given, and she commenced to improve the day after. On the third day her cough was much better, and the pharynx looked almost natural. The eruption on the palate had almost disappeared, but there was still some redness on the edges. Rumex 5th, as before, cured.

Dr. B. F. Joslin reported eleven cases of cough cured with the 30th dilution of the Rumex crispus. I give a brief abstract of the cases:

CASE I.—*Dry cough;* tickling in the throat-pit; excoriation in the larynx and behind the upper portion of the sternum; cough worse on working; pain in the chest. Rumex 30th cured the case; three doses only were given. The cough had lasted several weeks before the Rumex was prescribed.

CASE II.—*Fluent coryza*, with cough, excited by tickling in the throat-pit; sensation of excoriation behind the upper part of the sternum, while coughing. Rumex 30th, morning and evening, cured promptly.

CASE III.—*A hoarseness in the evening; cough; excoriation* behind the whole of the sternum on coughing and inspiration, and coldness of the fingers. Rumex 30th, three times a day, cured in a few days.

CASE IV.—Severe, dry cough, excited by an irritated pressure in the throat-pit; excoriation in the larynx and chest. Rumex 30th, morning and evening, cured in a few days.

CASE V.—*Cough* excited by pressure on the throat, and attended with excoriation in the larynx and chest, and hoarseness. He took one dose of Rumex,

thirty drops, in the morning; in the afternoon of same day was much better; no cough next day, nor did it return.

CASE VI.—Violent cough in the evening, worse about 11 o'clock at night; aggravated by lying down; excited by a tickling behind the sternum, and with accumulation of mucus in the fauces, near the posterior orifice of the nares. One dose of Rumex 30th removed the paroxysm in a few minutes, and did not return.

CASE VII.—A young lady complained of shootings from the pit of the stomach into the chest, in various directions; sharp pains in the left chest; dull aching in the forehead and slight nausea. Rumex 30th, morning and evening, cured in two days.

My own experience with Rumex has been mainly with the third dilution. I have cured many coughs where Phos., Merc., and Caust. seemed indicated but failed. The remedy has not been used as much by the profession as its merits seem to demand.

Dr. Hughes, of England, writes concerning Rumex:

I would call attention to the remarks of Dr. Carroll Dunham on the action of this substance on the air-passages, cited by Dr. Hale, in "New Remedies." It is a model of delicate application and discriminative comparison. Nor is it fanciful; for I have never seen any curative action so prompt and certain as that of Rumex crispus over the cough described by Dr. Dunham. Twice already have I seen an incessant racking cough of days' duration extinguished by one or two doses of the sixth dilution of this drug. I give it thus high, because the provings of the drug which have led to this use of it were instituted with very small doses.

I hope that these few notes may stimulate others toward the clinical verification of the provings of the new remedies, while they serve in themselves as a slight contribution toward this object.

Rumex has been an admirable remedy in my hands in many cases of acute bronchial affections. I recall one case in which there was dry, tickling, spasmodic cough, with tenderness in the larynx and trachea, rendering the cough quite painful. I have used it only in the 30th potency.

Dr. M. A. Tinker sends us the following cases of cough:

CASE I.—Charles S., aged twenty-six; nervous, sanguine temperament; dry cough; tickling in the throat-pit; continued desire to cough on breathing cold air, worse after retiring to bed; obliged to cover the mouth with bedclothes, and use every effort to prevent coughing; has occasional pains through both lungs, extending up into the trachea; feels weak and exhausted in the morning; very frequently a rawness of the throat in the morning; Rumex 6th relieved in two days, and no return.

CASE II.—Augustus D., aged twenty-three; nervous temperament, been subject to severe, dry cough at times for several years, and thinks himself con-

sumptive; cough worse in the evening; unable to breathe the cold air of his sleeping-room, and has a severe coughing spell in the morning, on rising, and at times during the day, and especially on taking a deep inspiration; is thin and rather emaciated; has nightsweats frequently; tickling in throat and down at the top of the sternum; after coughing for some time, a rawness in the throat of a very disagreeable character, extending from the pharynx down beneath the upper portion of the sternum, accompanied by a burning sensation through the upper lobes of both lungs (the clavicular region), with loss of appetite, and considerable prostration of general strength. After a long and careful physical exploration of the chest, I could find no indication of actual presence of tubercles. I am fully satisfied on this point. I prescribed Rumex 3d. In twenty-four hours much improved, and has continued to progress, and is now at his usual occupation, and considers himself about well, coughing only occasionally.

I find Rumex, in this form of irritation, is the great remedy; it succeeds when Phosphorus and many other remedies have failed with me. I have used it with unbounded success where these dry titillating symptoms occur.

Some of the provers, especially Dr. Rhees, experienced some peculiar and severe cardiac symptoms, which we could hardly, at first thought, expect from this remedy. Yet we have no right to judge, before we prove a remedy thoroughly, of its probable effect on the body. It does seem, however, if Rumex thus affects the heart, that of the thousands who have taken the Dock in large doses, some of them would have had dangerous heart disease. But we hear of no such instances. Dr. M. J. Rhees, one of the original provers of this remedy, furnishes the following interesting case of cardiac disorder:

Joseph H., aged thirteen years, subject to violent attacks of *inflammatory rheumatism*. In the spring of 1858 I attended him in a severe attack, in which the disease concentrated itself on the heart with so much violence that I almost despaired of his recovery. Pulsatilla cured the disease at that time. In December, 1858, he was again attacked, but the heart was the principal seat of the disease from the first. On the 24th of December his symptoms were: *violent palpitation of the heart*, with throbbing of the carotid, and throughout the body, visible to the eye, and shaking the bed; pulse 120; violent aching pain in the region of the heart; great *dyspnœa*, especially while lying, so that it was necessary to prop him up in a sitting posture in bed; face red and somewhat puffed up, especially about the eyes, which were red, heavy, and lustreless; tongue coated with white fur, with red tip and edges; excessive thirst; no appetite; bowels costive. I commenced the treatment by giving Aconite 3d and Pulsatilla 3d alternately. Some relief followed the administration of these remedies, but the improvement was slow. From December 23th to January 9th, 1859,

various other remedies were used, as they seemed to be indicated, but without decided improvement on the whole. On the latter date the patient complained of a stinging pain in the region of the heart, which was increased by lying down and by breathing deeply. In my arranged proving of Rumex crispus the following symptoms may be found: "No. 41, burning, stinging pain in the whole of the left side of the chest, suddenly, when taking a deep inspiration while in the act of lying down in the bed at night." "No. 49, burning, stinging pain in the left chest near the heart; came on soon after lying down in the bed at night." These symptoms were fresh in my memory, and I accordingly gave Rumex crispus 6th, in water, two teaspoonfuls every three hours. January 10th, considerably relieved of the pain in the chest, and otherwise improved; continued Rumex. January 11th, the pain in the chest is almost removed. Rumex was continued several days after this, with the effect of entirely relieving the pain in the chest; but the improvement in other respects ceasing, Rumex was discontinued, and other remedies substituted. Belladonna 30th and Phosphorus 30th eventually cured the case, and there has been no return of the disease.

This case is in many respects a marked one. But it will require further clinical experience to prove satisfactorily that Rumex will cure serious heart affections.

SALICYLIC ACID.

It is high time that the homœopathic school had begun to investigate the pathogenetic action of this powerful remedy. I commenced the use of it about two years ago, first as a remedy in fermentative *dyspepsia*, when there occurred distension and formation of gases in the stomach and bowels after meals. Its action in such cases was followed by gratifying results.

My next experience with it was in cases of *cholera infantum* or other diarrhœa of children, when the eructations had a peculiarly putrid and offensive odor. It acted better than Arsenicum, removing the fetor, and benefiting the intestinal disorder.

Experimentally I tried it in several cases of phosphatic urine, when the secretion was very offensive. In one case pus and mucus were largely present. It not only benefited the local urinary trouble, but removed the fetor, the pus, and the mucus from the urine. I have reported one case of *catarrh of the bladder*, when this agent, locally applied by enema, removed the disease in the short time of five days.

In the month of May, 1876, I had three cases of *septicæmia*, occurring in lying-in women, due to absorption of morbid dis-

charges through lesions of the vagina. In these cases the symptoms were very grave, the temperature was very high, with chills, abdominal tenderness, etc. Under the use of Salicylic acid, these cases recovered sooner than I had ever known such cases recover. In a paper read before the Wisconsin State Society, I narrated these cases. This paper was published in the "Medical Investigator," August, 1876.

In the winter of 1876 the allopathic journals teemed with reports of this wonderfully successful use of this medicine in acute inflammatory rheumatism. My pupil, Dr. E. A. Gatchell, while in attendance on the clinic of the Cook County Hospital, at my request carefully watched the results of its use in this disease. He reported the results as generally very successful, fully agreeing with the favorable experience reported in the various journals. The doses used in the hospital were about ten grains every hour.

I determined to test its value in my own practice. Selecting two cases of polyarthritis rheumatica, as severe as any I had ever seen, where the temperature was 105°, the pain intense, and the tenderness excessive, I prescribed the acid in doses of ten grains every three hours. The results surprised me. *After five or six doses had been taken, the pain, soreness, and inflammation declined, the temperature fell to* 100°, *and general improvement set in.* In four or five days the patients were *cured.* Only weakness, such as might be expected from the disease, remained. Never before had I seen such results from any of our best remedies. With Aconite, Bryonia, Cimicifuga, and Verat. viride I had cured such attacks, but never in less than nine or fourteen days.

My stricter colleagues may inquire why I did not use the 3d trituration, or even the 30th dilution? I reply, that I adopted the rule Hahnemann laid down. He demanded of those who wished to test the value of the remedies he advised in disease, that they should use them as he did, namely, *in the same strength and at the same interval.*

If I had used fractions of a grain, or the 3d trituration, and failed to cure my patients, and then declared the medicine worthless in rheumatism, I should have been acting illogically and unjustly. As the sequel will show, I acted fairly and honestly, for not long after I had several similar cases, which I placed under the

use of Salicylic acid in smaller doses. To one I gave five grains every four hours, to another five grains of the 1^{x} (trit.) every two hours, and another, ten grains of the 3^{x}, every three hours. These cases were not as severe and painful, nor did the temperature run as high as my first cases. The resulfs were: In the first case (under five grains) he made rapid improvement, and was well on the seventh day. In the second case (under 1^{x}) the improvement was slow, and he was not free from the inflammation till the ninth day, and he was left with effusion of one knee-joint, which had to be removed by the galvanic current. The third case (under 3^{x}) progressed unsatisfactorily. The medicine did not seem to "take hold," and I resorted to Bry. and Puls., and the symptoms did not disappear for fourteen days.

Since this experience I have treated several cases successfully with Salicylic acid, but I have found that the dose which cures the most promptly, without causing any pathogenetic symptoms, ranges from five grains of the crude salt every two hours to five grains of the 1^{x} trit. every two hours.

Notwithstanding the fulminations of a portion of our school I believe that certain medicines require to be given in definite material quantities to develop their curative action in certain diseases. I believe such is the case with Salicylic acid in acute rheumatism, Quinine in malarial intermittents, and Veratrum viride in acute inflammatory fever, and I shall adhere to this belief until cases of undoubted trustworthiness, proving to the contrary, are presented. I will here add, that in septicæmia (pyæmic fever), it requires about the same quantity to remove the disease, while in dyspepsia, diarrhœa, and the morbid states of the urine above referred to, I got good results from the 3^{x} trit. or dilution. (The dilutions run up in equal parts of Glycerin and Alcohol seem to act best.)

The allopathic experience with this agent up to this date is well summed up in the "Practitioner" of March, 1876, as follows:

> In polyarthritis rheumatica its beneficial use is universally attested. Indeed, one may say with certainty that, in many cases, after three or four doses, or even after five or ten grams (75 or 150 grains), not only is the fever reduced, but the articular pains are also dispersed, so that in a few days acute cases may be looked upon as cured.

Dr. Stricker is quoted in an article in the Chicago "Medical Journal and Examiner," as follows:

All the patients thus treated were not only relieved of their fever, but also of the local symptoms, *i. e.*, the swelling, redness, and especially the painfulness of their joints, within forty-eight hours, most of them even within a much shorter period.

Professor Traube says that

Fourteen cases of acute rheumatism were treated with the acid, and in all cases, within two days, all fever had gone, as well as the redness, swelling, and pain in the joints.

It has also been used very successfully for offensive discharges from the ear, and offensive breath from any cause, even for offensive fetor of the expectoration in gangrene of the lungs.

Dr. Œhme, in the "North American Journal of Homœopathy," quotes from three German physicians the results in fifty-six cases of diphtheritis, accompanied with the following symptoms:

Violent fever; the entire fauces covered with a white exudate. In two cases hoarseness and barking cough (affection of the larynx) were present. In some a gargle was given, while in others it was not. The average dose was one-sixth of a grain, hourly, and the average duration of the disease was, in most of them, two to five days; except in a few of the most severe it was eight days. Among the cases there were none of diphtheritic inflammation of the kidneys, nor any cases of paralysis of the palate.

I have used it in but few cases of diphtheria. In adults, a few drops of the 1^{x} diluted in Glycerin, repeated every two hours, with a gargle of two grains to a teaspoonful of water, with ʒij of Glycerin, or Alcohol, has usually sufficed to remove the false membrane, and the fetor in two days. In children half the above strength is an ample dose. I think it far exceeds Carbolic acid as a topical application. In a few cases I alternated it with Phytolacca, but it might have been efficient alone.

Thus my own experience (although limited) shows that very large doses are not required. It is not necessary, therefore, to use massive doses, even in rheumatism (twenty grains every hour or two), to the risk of causing pathogenetic effects.

It may be well to record what such pathogenetic effects are. We find reported that it has caused "vertigo, hallucinations, tinnitus aurium, burning pricking in the throat, copious, even colliquative sweating, partial collapse, great reduction of animal heat," etc.

The drug effects have in some cases reached to such a degree of severity as to be worthy the name of poisoning, as witness the following:

After one hundred single doses of Salicylate of sodium, given at midday, in cases of typhoid fever of nearly equal severity, there was almost immediately a fall of temperature, the maximum result being reached in most cases in from four to five hours, and rarely in from eighteen to twenty-four hours. This fact was fully established by thermometric observations made every ten minutes in the axilla and rectum. This reduction of temperature was noticed in eighty per cent.—DR. EWALD.

Within fifteen minutes, or even less, after the administration, a copious perspiration breaks out, first on the face, then on the thorax, abdomen, and the rest of the body, accompanied by a redness of the skin, more especially that of the face, and may be so copious that the patients may lose 500 to 750 grams of water (a pint to a pint and a half).

The defervescence begins with the perspiration, though the two do not continue *pari passu*. Generally the pulse, respiration, and intestinal tract are unaffected. Contrary to the above, Dr. J. G. Richardson says, in the "Philadelphia Medical Times," that, "in four cases, this agent, so lavishly lauded of late in rheumatism, was followed by some adverse symptoms. In the first case, 140 grains of Salicylic acid were administered in 120 hours, when it produced nausea, and was discontinued, without any effect upon the rheumatic complaint having resulted." In the second case, 110 grains, given in 72 hours, produced a temperature of 96½° F., the pulse and heart-beat becoming intermittent. The pain and swelling were entirely abolished, and the patient received Quinine, beef-tea, and punch freely, and was soon discharged.

In the third case, a hyperdefervescence resulted from taking 45 grains in 3 days. In the fourth case, 55 grains were administered in 48 hours to a man fifty-one years old, an old rheumatic, on the tenth day of the attack. His pains were much relieved, but this favorable result was attended with profuse perspiration, rapid reduction of temperature, and marked diminution of the frequency and force of the pulse. He also complained of great prostration, and was slightly delirious upon

waking from sleep. In all these cases the tendency toward alarming prostration seems to be decided.

The acid excites some dryness in the mucous membrane of the mouth and pharynx, followed by increased secretion from their surfaces, slight deafness, and in some cases patients become unusually lively.

It is possible that some of the readers of this volume may be unacquainted with the pharmacology of Salicylic acid. As nearly as I can ascertain from chemists, and my own experiments, the following table will give the solubility of the acid (chemically pure) in the following vehicles, being those which we can use in homœopathic practice, as they are non-medicinal.

Alcohol, 25 per cent.,	¼ per cent.
Glycerin and Alcohol (equal parts),	30 "
Glycerin,	10 "
Glycerin, Alcohol, and water (equal parts),	⅛ "
Glycerin and water (equal parts),	1/20 "
Water,	1/100 "

It will be seen that we can readily make the 1ˣ in pure Alcohol, and carry up the dilutions for internal administration, in cases when homœopathically indicated. If we desire to give large quantities in acute rheumatism, we can prepare it of the strength of six or eight grains in each drachm of Glycerin, an excellent vehicle in which to administer it in that disease. In cases of *pyœmia* or *septic fever*, an excellent preparation is equal parts of Glycerin and brandy or whiskey, which will dissolve eight grains to ʒj. From this strong solution the 2ᵃˣ or 3ˣ can be prepared in the same menstrua, and as it is necessary in nearly all cases of these pernicious fevers to give stimulants and food, the brandy or whiskey and Glycerin, a teaspoonful every two or three hours (gtts. 30 of each) answer a double purpose. It will be seen by reference to the table that water will not dissolve more than 1/100th of the acid, making only the 1° dilution. But this small power may be made excellent use of in practice, for it has been discovered that even the strength of one part in one thousand will prevent putrefaction in *water*, thus enabling us to purify water in which there are organic substances.

Milk will dissolve as much if not more than water. One part

in five hundred of milk (1 gr. to ℥ij) will postpone "curdling" thirty-six hours later than in milk not medicated with it. It has seemed to me that we can utilize this fact. When we consider that children who are fed on artificial food, milk, etc., with or without the bottle, are very apt to suffer greatly from the "spoiling," "souring," or "curdling" of such food, bringing on attacks of vomiting, diarrhœa, gastro-enteric fever, and even cholera infantum, the question arises, can we not, by adding this minute quantity of Salicylic acid to their food, prevent all this?

I could answer favorably by citing a few cases where mothers, starting on a journey in hot weather, have asked me to advise them as to the best plan of feeding on the cars. If *condensed* milk agrees with the child, I advise that. If not, I have advised the addition of two or three grains to a pint or quart of milk, with the effect, as I learned, of preventing the spoiling of the milk, without causing any medicinal symptom in the children. Of course it would not answer to advise this as a continuous practice, but only for a day or two.

There are some specimens of the acid which are much more soluble than others, and some that appear very insoluble. The pure German crystals are to be preferred. While I value Salicylic acid highly as a topical application in the treatment of offensive catarrh, otorrhœa, fetid breath, fetid sweat, etc., I have not been pleased with it as an enema in puerperal states. It does not seem to destroy the fetor of the vaginal and uterine discharges as well as Carbolic acid.

An aqueous solution cannot always be made strong enough unless the acid is very pure. Some specimens require one thousand parts of water to dissolve *one* of it. In such cases the addition of a few grains of Borax increases very greatly its solubility, and also increases its antiseptic and curative power. I usually use it in the above local affections in the strength of five grains to a pint of water. If a sediment is precipitated, add ten or fifteen grains of Borax, and apply this through a douche, spray atomizer, or as an enema.

Salicylic acid has been used most extensively in the Jacob's Hospital, Leipsic, by Professor C. Thiersch. In the second series of R. Volkmann's "German Clinical Lectures" may be found a re-

port on the clinical results of the Lister method, and the substituting of Salicylic for Carbolic acid. The results of the Lister method with Carbolic acid as an agent, although good, were not so brilliant in the hands of Thiersch as he had hoped for, and it should be said that his trial of the method was made before its details had been perfected. Believing that the acid (Carbolic) itself was productive of a good deal of irritation, and that its volatility was a serious objection, necessitating frequent change of dressing, Thiersch finally selected Salicylic acid as a substitute. The part operated upon is prepared, as in Lister's method, by washing with a five per cent. solution of Carbolic acid or Salicylic water.* The spray used during operation is Salicylic water, all vessels are secured by Lister's catgut ligature, and the edges of the wound are put in apposition with antiseptic sutures. In all extensive wounds a drainage-tube is inserted, and thoroughly flushed with the Salicylic water until the fluid returns nearly clear. The line of the wound is covered with a strip, three fingers wide, of perforated oiled silk, gutta-percha tissue, or antiseptic gauze. Over this is placed, first, a layer of 10 per cent. Salicylic cotton† an inch thick, and, second, a two-inch layer of 3 per cent. cotton,‡ the whole being secured by a gauze bandage. It hardly need be said that the cotton should overlap the boundaries of the wound to a considerable distance, say a hand's breadth, in an amputation of the leg. In place of Salicylic cotton, Thiersch has of late used Salicylic jute,§ containing 4 per cent. of the acid. In the absence of systemic disturbance, the dry dressing is left in position eight or ten days, when the second dressing is applied under antiseptic precautions, and left until the wound heals. Should a high temperature be present, or pain in the wound complained of, the

* Salicylic water.—Salicylic acid, 1 part; water, 300 parts.

† Salicylic wadding, 10 per cent.—Dissolve 1 kilogram of Salicylic acid in 10,000 grams of spirits, sp. gr. 0.830, dilute with 60 liters of water at 158° to 176° F., and soak 10 kilograms of clean cotton-wool in the mixture.

‡ Salicylic wadding, 3 per cent.—Dissolve 750 grams of Salicylic acid in 7500 grams of spirits, of sp. gr. 0.830, dilute with 150 liters of water at 158° to 176° F., and soak 25 kilograms of clean cotton-wool in the mixture.

§ Salicylic jute.—To soak 2500 grams of clean jute. Mix 75 grams Salicylic acid, 500 grams Glycerin, 4500 grams water, and raise the temperature to 158° to 176° F.

dressing must be opened, stitches removed, and the wound thoroughly washed out, the cotton being replaced. In case of failure to secure union primarily, irrigation by Salicylic water is to be practiced. Gangrenous flaps, after amputation, and greater compound fractures are treated by irrigation with Salicylic water, after Esmarch's plan. Deepseated abscesses of size should be opened at one or more dependent points, and drainage-tubes inserted, washing out with Salicylic water being practiced as long as the walls are non-adherent. Large superficial abscesses are laid open, the granulations scraped away, a drainage-tube inserted, and compression made by Salicylic cotton or jute after thorough cleansing by flushing. A careful review of the elaborate tables of Thiersch shows that while in most instances the same brilliant results were obtained as under the Carbolic method, there are still many more cases of erysipelas than should be met with if that affection be dependent upon atmospheric germs.

Salicylic water should not be used to disinfect instruments on account of its action upon the metal; for this purpose the Carbolic solution should be employed. The acid is somewhat irritating in odor, provoking coughing and sneezing when used in spray or in dry dressing, but can be depended upon as an efficient substitute for Carbolic or Thymic acid when deemed preferable.

In addition to the above uses, this acid has been used successfully in *sciatica*, in doses of one-tenth of a grain, or one grain every three or four hours. By reference to the provings (see Allen's "Encyclopædia"), as well as the toxic symptoms above mentioned, it will be seen that it causes in large doses a peculiar *vertigo*, with *tinnitus aurium*, *vomiting*, fainting, etc. These symptoms so closely simulated "Monniere's disease" of the internal ear, that several aurists of our school prescribed it successfully in that affection. Dr. Dyche Brown and others, of England, have published many cases illustrative of curative action in this disease.

SALICYLATE OF SODA.

This preparation was introduced as a substitute for the acid. It is less irritating in its local action, and less liable even in large doses to cause unpleasant toxic effects. It has not been found as

useful as a disinfectant, but seems to be a good substitute for the acid in any disease indicating the internal use of the acid. It seems to have the same control on *rheumatism*, *rheumatalgia*, *neuralgia*, and allied disorders.

Like the acid, the soda-salt has been found promptly curative in "Monniere's disease," in the second and sixth dilutions. Many of its symptoms are so similar to Quinine, that I would suggest that both the acid and the salt be used as an antidote to its toxic effect. In the Quinine cachexia, so common in malarious districts, these remedies, in the 1ˣ trituration, will prove to be efficient in removing many of the symptoms.

The Salicylate of soda will prove better than the acid as an injection into the bladder in cases of *vesical catarrh*, with offensive urine, *offensive lochia*, and also as a spray, in cases of *offensive expectoration* in *pulmonary gangrene*, or *vomicæ;* as a gargle, in *putrid sore throat*. In cases of acid or putrefactive fermentation of food in the stomach, with evolution of offensive gas, the soda-salt will be found very effectual.

SANGUINARIA CANADENSIS.

This is one of the most powerful of all our indigenous plants, rivalling in medicinal effects the most active mineral poisons. The following observations illustrate its toxic effects:

In doses of from eight to twenty grains of the powdered root it acts as a poison, producing nausea, heat or burning sensation in the stomach, tormenting thirst, faintness, vertigo, indistinct vision; finally, violent spasmodic efforts of the stomach, free vomiting, followed by alarming prostration. When the dose is very large the vomiting may not take place.

Professor Samuel L. Mitchell, of New York, published the following case of poisoning from the tincture of blood-root:

Four men who had been employed to clean out and whitewash the apothecary shop of Bellevue Hospital found a demijohn containing what they thought to be brandy or some other spirit, and they each took a good drink of it. They were all soon seized with severe racking and burning pains in the stomach and bowels, with intense thirst. They all died.

In moderate doses Sanguinaria is regarded as an emetic, nauseant, expectorant, and diaphoretic.

In large doses it is in some degree narcotic, sedative, stimulant, alterant, emmenagogue, escharotic, and errhine. In small doses its effects on the pulse re-

semble those of Digitalis. It is remarkable, however, that it seldom influences the pulse, either in frequency or tension, until it has been used for five or six days; and in a majority of cases the effect is not seen for eight or ten days.—TULLY.

Zollikoffer says it is "sudorific, emetic, and purgative." Smith, Thatcher, and Allen compare it to Digitalis. Tully says it unites the properties of Scilla, Ammonia, Senega, Digitalis, and Guaiacum without their violent operations. Rafinesque says it is "acrid, narcotic, emetic, deobstruent, sudorific, expectorant, vermifuge, escharotic, stimulant, and tonic."

The diseases in which Sanguinaria has been hitherto thought most useful are those of the throat, chest, stomach, and liver. It has been most frequently employed in incipient *phthisis, bronchitis, catarrh, influenza, pneumonia, asthma, croup, diphtheria, cynanche maligna* or *putrid sore throat,* in which it produces the best effects when applied locally. It has also been useful in *scarlatina, pertussis, dyspnœa, dyspepsia, hydrothorax,* and *jaundice.* In the latter disease it was approved by Colden, and it formed the basis of Rawson's specific for that disease.

Dr. McBride, of South Carolina, says that he used it with great advantage for "*torpor of the liver,* attended with *colic* and yellowness of the skin," a disease very prevalent in that climate.

Dr. Ives, of New Haven, also used it for diseases of the *liver,* and in the first stage of *croup.* Western practitioners have carried it much farther. Some "specifics" are composed of it. It has also been successfully used in *dysentery, amenorrhœa, inflammatory rheumatism,* and *rheumatic gout.*

Blood-root is an acrid emetic, with narcotic and stimulant properties. It is also expectorant, sudorific, alterative, emmenagogue, tonic, antiseptic, detergent, and escharotic, according to the mode in which it is employed. It is a very active agent, and is capable of exercising a powerful influence on the system. When given in small doses it stimulates the digestive organs, accelerates the circulation; in large doses it occasions nausea and consequent depression of the pulse; in a full dose it produces active vomiting; in overdoses it causes violent emesis, a burning sensation in the stomach, tormenting thirst, faintness, vertigo, dimness of vision, alarming prostration, and even death.—KING.

Sanguinaria is emetic, expectorant, diaphoretic, acronarcotic, sedative, alterative, and, in small doses, tonic and stimulant. In full doses it induces nausea and vomiting, with a sensation of warmth in the stomach, acceleration of pulse, and slight headache. It acts on the fauces, producing an acrid impression, and in some cases it proves cathartic. The leaves and seeds possess similar properties.

The seeds, however, are said to exert a marked influence upon the brain and nervous system, occasioning torpor, languor, disordered vision, and dilated pupils; in large doses the *emesis* is violent, there is a burning sensation in the stomach, faintness, vertigo, dimness of vision, and alarming prostration.—KING.

Effects of Sanguinaria.—The late Professor R. P. Thomas, of Philadelphia, experimented with this substance, and obtained the following results:

In doses of from one-twelfth to one-eighth of a grain it acted merely as an expectorant, without disturbing the stomach.

In doses of one-sixth to one-fourth of a grain, every two hours, it produced nausea and sometimes caused vomiting.

In doses of one-half grain in solution, every ten minutes, it almost uniformly caused vomiting after the second or third dose.

In doses of one-eighth to one-sixth of a grain, every three hours, continued for two days or more, it generally reduced the pulse from five to fifteen beats per minute.

It is thus seen that the general pathogenetic effects of the chief alkaloid contained in the root were essentially, perhaps, the same as those long known to belong to the entire substance; but our professional as well as our positive knowledge is almost entirely derived from experiments with the powdered root, the tincture, or other preparations from it. Like most of our best remedies it is, indeed, a very multifarious combination.

The toxical and pathogenetic effects of Sanguinaria indicate that it has a profound effect upon the nerves of sensation and motion, but the exact nature of this action has not been sufficiently investigated. Among the symptoms we find "a quickly diffused and transient, but at the same time a very peculiar nervous thrill, which is often extended to the minutest extremity." In large doses it causes "torpor, languor, and dilatation of the pupils."

There are a few drugs, like Pulsatilla, which seem to affect the mucous tissues of the whole system; others, like Squills, have a specific affinity for the pulmonary mucous membrane; Sanguinaria is an analogue of the latter to a certain degree, although it more nearly approaches the action of Tartar emetic. It was known as an expectorant long before the allopathic profession brought it

into use, and now both that and the eclectic school value it highly for that purpose. Blood-root does not seem to notably increase the secretions from the intestinal mucous tissues.

It is said to be useful in *pleuritis* and *synovitis*.

Sanguinaria seems to cause pains of a *rheumatic* or *myalgic character*. It is difficult to decide which of the two affections were cured by this medicine in the reported curative symptoms. I am inclined to the opinion, however, that Sanguinaria, although it may cure some neuralgias, will not, like Colchicum and Cimicifuga, act specifically in rheumatic affections.

Sanguinaria has not been used in fevers generally, but it has been administered successfully in *hectic fever*. In the pathogenesis of no other medicine, except, perhaps, Phosphorus and Lycopodium, do we find the hectic paroxysm as perfectly delineated; generally, the hectic is associated with cough and other symptoms of lung affections, but there are exceptions.

Dr. Bute cured: (1.) In a lady, coldness of the feet in the afternoons, at the same time the tongue was painful and sore upon being touched, like a boil, and there was stiffness of the knee and finger-joints.

(2.) Burning of the palms of the hands and soles of the feet, compelling him to throw the bedclothes off the feet for the purpose of cooling them. These paroxysms generally come on in the P.M. or evening.

(3.) Paroxysm of fever in P.M., with circumscribed redness of the cheeks; cough and expectoration.

Dr. Morrow relied on Sanguinaria as a remedy for hæmorrhages in general, because of "its power of quieting excessive or depressing the natural circulation." He advises it particularly in hæmoptysis; it has also been used in menorrhagia, epistaxis, etc.

We can sometimes comprehend the sphere of action of a drug by comparing the *ensemble* of its symptoms with that of other drugs; a careful analysis of the symptoms and toxical effects of Sanguinaria show its marked resemblance to three of our most important medicines, namely, Arsenicum, Phosphorus, and Tartar emetic; more remotely it resembles Belladonna, Lachnanthes, Veratrum viride, and Iris versicolor. Lycopodium, Sulphur, Kali

carbonicum and Rumex crispus have some symptoms in common with Sanguinaria.

The blood-root has been used successfully for *scaly* eruptions, old indolent ulcers, ill-conditioned ulcers with callous borders and ichorous discharge; the powdered root is escharotic, and when applied to fungous growths causes their rapid disappearance. I consider it the best application we have for this purpose; it has also cured warts and *polypi*, when given internally and applied topically. Dr. Sholl uses it externally and internally for carbuncle with alleged success.

Dr. Bute found blood-root curative in *headaches* with "distension of the temporal veins, which were painfully sensitive to the touch," also with "feeling of soreness on small spots of the head, especially in the temples." Other physicians have cured cephalalgias with "pains in the head, in rays drawing upward from the neck." Dr. Hering considers it homœopathic to the so-called North American sick headache. He has cured, with the high dilutions, the following symptoms:

Severe pains in the head, with nausea and vomiting, frequently with bilious vomiting, in attacks, with hebdomadal or longer intervals from very different inducements, commonly beginning in the morning, increasing in violence during the day, only diminished by lying quiet, and, when possible, by sleep.

Dr. Hering also gives the following indications for Sanguinaria:

It is the best remedy in most cases of migraine or sick headache. Still, it must prove most useful when the attacks occur paroxysmally, viz., every week, or at longer intervals; or when the pains begin in the morning, increase during the day, and last till evening; when the head seems to feel that it must burst, or as if the eyes would be pressed *out*, or when the pains are *digging*, attended with sudden *piercing*, throbbing lancinations through the brain, involving the forehead and top of the head in particular, and being most severe on *right* side, followed by chills, nausea, vomiting of food or bile, forcing the patient to lie down and preserve the greatest quiet, as every motion aggravates the sufferings, which are only relieved by sleep.

CASE I.—A man was attacked with frightfully severe headache; the only relief he could obtain was from pressing the back of his head against the headboard of the bed. An infusion of Sanguinaria root removed the headache permanently.—HERING.

CASE II.—A lady suffered with frequent and severe attacks of headache, with such sensitiveness during the paroxysm that no one dared to walk across the room. Sanguinaria 6th was given, but the first dose produced such an aggrava-

tion that the patient became almost beside herself; after the second dose she fell into a pleasant sleep, from which she awoke refreshed. Dr. Helfrig always gave Aconite and Belladonna during the paroxysm of sick headache, and used Sanguinaria 30th during the interval, unless some other remedy was more indicated. —HERING.

Many of the symptoms of Sanguinaria are similar to those pains which Inman describes as belonging to *myalgic* headaches, particularly the superficial sensitiveness and drawing pains. *Congestions of the head* are controlled by this medicine, when the *temporal veins are distended.* It is probable that it is also homœopathic to some of the varieties of *apoplexy.* Its known curative influence over *hæmorrhage* from congestion would suggest its use in *sanguineous* apoplexy. The symptoms would seem to imply that *venous* congestions (if the term may be allowed) are most under the control of Sanguinaria. .

Dr. C. Neidhard says:

One of the most important indications for the employment of Sanguinaria canadensis is this symptom: Pain like a flash of lightning on the back of the head.

Dr. E. W. Beebe reports the following remarkable cases of "sick headache" cured with this medicine:

Mrs. P., aged fifty-five, blue eyes, dark-brown hair, of nervo-sanguine temperament, full habit, and somewhat corpulent. The history of the case is as follows: Has been subject for a period of fifteen years to attacks of "sick headache," which commence in the morning on waking, and increase during the day, and are only relieved by sleep at night; the pain is confined chiefly to the temples and vertex, and so violent as to cause the patient to cry aloud. Nausea generally commences in the morning, followed by vomiting, first of the contents of the stomach, and afterwards of a substance that seems to be pure bile, with occasionally a considerable quantity of an acid mucus, with great distress in the stomach, of a burning character; with great weakness or "goneness," as the patient described it, not amounting to a real pain, but which was even worse to bear than the headache; not the least quantity of food or drink could be taken without its being immediately vomited. The attacks came on irregularly, sometimes once in a week or ten days, then again perhaps not for three or four weeks. The health of the patient is good otherwise, with the exception of slight constipation at times. She has been treated by a number of physicians of the eclectic, homœopathic, and old schools of medicine, and has, as she informs me, received no benefit. I diagnosed the case as one of dyspepsia, from the use of highly-seasoned and rich food. I found also that the patient was in the daily habit of using strong coffee, which I prohibited, regulating the diet, etc. I then prescribed Nux and Bryonia, night

and morning, expecting these medicines to relieve, but, to my great surprise, the patient did not improve under the remedies, and after continuing them until I became satisfied that I had not made a right selection, I changed them for others, such as Ars., Puls., Chin., etc., which, together with the others generally used in such cases, were continued for some four or five months, at the end of which time I had found I had not lessened the frequency of the attacks in the least, nor had been able to relieve, for the time being, the vomiting, though I had administered Ipecac., Tartar emetic, etc., till I had become about discouraged. The only good I could perceive I had done was to relieve the sour risings from the stomach, which I did with Sulphuric acid. About this time I procured a copy of Hale's "New Provings," and upon reading the symptoms of Sanguinaria canadensis, I said to myself, here is an exact counterpart of that troublesome "*headache case.*" Upon meeting my patient a few days afterward, I said to her, "If there was any truth in the homœopathic law, I now have a remedy that will cure your headache," and accordingly prescribed four pellets, to be taken night and morning, medicated with the mother tincture. She had no more attacks for upwards of two months, and then had but a very slight one. I accordingly prescribed the same remedy again, and have had no further trouble with the case.

I have since used this remedy in similar cases, and with the same success.

It has cured the following symptoms when occurring during other affections: "A red cheek, with burning of the ears;" "redness of the cheeks, with cough;" "cheeks and hands livid in typhoid pneumonia." These symptoms are also found in the provings of Phosphorus, Lycopodium, Sulphur, and Lachnanthes.

No drug so surely produces intense irritation of the nasal mucous membrane, when inhaled, as the Sanguinaria. Even its internal administration causes coryza. It is not strange, therefore, that homœopathists have found it curative for acute and chronic *coryza*, also for "loss of smell." It has cured "*influenza*, with rawness in the throat, pain in the breast, cough, and finally, diarrhœa." This last is a characteristic peculiarity of the drug, and as many catarrhal affections tend to result in intestinal irritation or diarrhœa, the Sanguinaria should be remembered in each instance. Dr. Barton (allopathic) says he has "heard of the application of the powdered root to a *fungous tumor* within the nostril, with the effect of producing detumescence, and bringing away frequently small pieces of the fungus, which, in the first instance, impeded the progress of the air through the nostril, and was supposed to be a polypus." Dr. Smith (botanic) says: "Applied to fungous flesh it proves escharotic, and several *polypi* of the soft kind were cured by it." Dr. Becker (homœopathist) states that a

polypus of the nose ceased to grow from the time the powder of the root was snuffed. Several physicians of my acquaintance claim to have cured *nasal polypi* by the internal administration of the tincture of blood-root. It was used in the lower dilutions in some cases. The finely powdered root forms one of the ingredients of many of the "catarrh snuffs" sold in the shops. It is often used as a domestic remedy for chronic catarrhal affections of the nose. Dr. D. C. Powers, of Coldwater, Michigan, was very successful in the treatment of obstinate nasal catarrhs and *ozæna*. He prescribed the second trit. of blood-root as a "snuff," to be forcibly inspired up the nose, and gave at the same time Sanguinaria 3d, or Nitric acid, internally. It has cured, in my hands, many cases of ulcerative ozæna with *epistaxis*.

It is homœopathic to *catarrhal ophthalmia, granular lids*, and even *ulcers* on the *cornea*. I once cured a case of the latter, very happily, by the use of Sanguinaria 3d, internally and topically. The case had proved obstinate under ordinary treatment, and I bethought me of the beneficial effect of blood-root in indolent ulcers. A wash of about the strength of the 3d dilution was prepared in distilled water, and used as a collyrium. Under its use the ulcers healed in a week, leaving but a slight opacity.

Blood-root is useful in expulsive gingivitis, in cases where the gums become very spongy, bleeding, and fungoid.

Dr. Woodyatt, Professor of Ophthalmic and Aural Surgery in this college, uses the Sanguinaria very successfully, internally and topically, for *catarrhal affections of the inner ear* and Eustachian tube, and for the many throat affections which are so often the cause of *deafness* and *otalgia*.

It has cured *angina* and a species of *pharyngitis*, also *ulcerated sore throat*. I have been informed by intelligent persons that they have been permanently cured of recurring quinsy, with ulceration, by using a gargle of blood-root. Upon testing it in practice I found it quite equal to Hepar sulphur in its power of preventing attacks of *tonsillitis;* also in actual ulcerations of the throat. The lower dilutions were used.

Dr. Thomas Nichol reports the following concerning the use of Sanguinaria canadensis in *pseudo-membranous croup:*

Being busy at the time I neglected contributing to the first edition of Dr.

Hale's admirable work, though I had a few items which might have proved of interest. When I received the book, I turned at once to the article on Sanguinaria canadensis, expecting to find a dissertation on the use of this remedy in pseudo-membranous croup, and was disappointed on finding that it said nothing as to its use in this disease. In the region in which I then resided we had many cases of pseudo-membranous croup,—not the mere spasmodic variety, but the kind characterized by the deposition of a fibrinous membrane in the larynx and trachea,—and the mortality has been very great. Under allopathic treatment—the usual routine of purgatives, emetics, blisters, bleeding, and Calomel—almost every case died; and even under homœopathic treatment, aided by the appliances of the so-called hydropathy, the mortality was, perhaps, 25 to 30 per cent. I had tried in succession everything suggested in our works on therapeutics, from the orthodox Aconite, Spongia, and Hepar s., of Hahnemann, to the apparently heterodox application of Nitrate of silver to the larynx, recommended by Dr. Marcy in the first edition of his work on practice, and the result was as I have stated.

Despairing of help from our treatises on therapeutics, which, after all, merely present to us the views and experience of one man, and calling to remembrance the grand lessons taught me by Dr. Constantine Hering, I applied myself specially to the study of the homœopathic Materia Medica, and guided by the star of *similia* I decided that Sanguinaria canadensis possessed, both in its symptoms and in what Professor Walter Williamson calls "the run of the remedy," all the properties which would make it a true remedial agent in this disease. The symptoms which guided me were: "Chronic dryness in the throat and sensation of swelling in the larynx, and expectoration of thick mucus. *Aphonia*, with swelling in the throat. Continual severe cough, without expectoration, with pain in the head and circumscribed redness of the cheeks. Tormenting cough, with exhaustion and circumscribed redness of the cheeks. Croup." Shortly after I was called to a case of true croup, and having no preparation of the Sanguinaria in my office I gave minute doses of the pure *Sanguinarin* in a little water, giving an occasional dose of Aconite, and the result was most gratifying; and I was equally successful in a number of cases, to the diagnosis of which I paid great attention.

I am in the habit of regarding the literature of the eclectic school of medicine as being a vast mine of gems and precious metals, which can be best explored by the conscientious physician, lighted by the torch of the *similia*, and in the course of my studies I perused Professor Paine's "Epitome of Eclectic Practice," and his testimony is as follows: "The Sanguinarin is one of the most valuable remedies known in the treatment of pseudo-membranous croup. It has proved as much of a specific for that disease as Quinine has for ague. I have seen it used in a great number of cases, and have never known a single failure. It should be made into an acetic syrup, by adding twenty grains of Sanguinaria to four ounces of vinegar; steep, and add one ounce of sugar to form a syrup. Dose, one teaspoonful as often as indicated." I have frequently given the remedy in the form of an acetous syrup, as Professor Paine directs, though I found the dose he mentions to be far too large, and I found that one grain, or even less, in two ounces of vinegar, to be a better preparation. I have seen better results from the acetous

preparation than from the watery, and I refer those who may object to using vinegar in preparing the Sanguinaria to the fact that Hahnemann gave his infinitesimal doses of Opium to scarlatina patients in *beer*. (Essay on the Cure and Prevention of Scarlet Fever, in "Lesser Writings," page 375.) I regret that I kept no note of the greater number of my cases, but I give the record of one of the cases I attended lately.

On February 17th, 1866, I was called to see W. G., aged five years. He had been from home visiting some friends, fourteen miles distant, when he was taken sick. An allopathic physician, who had been called in, pronounced it a case of pseudo-membranous croup, advising a local application of Nitrate of silver to the larynx, but the mother preferred to hurry home and trust him to homœopathy. I found him with a hoarse muffled cough, complete aphonia, and the pulse was 132. On examining the fauces I found the soft palate and fauces covered with a continuous coating of pearly fibrinous exudation, and on auscultating the larynx the characteristic hissing sound was heard. The difficulty of breathing was very great; the child stretched back his head and grasped his throat in his agony, while the dark and swollen features added to the gloom of the prognosis. I commenced with the Sanguinaria, as directed above, and in fifteen hours the symptoms had undergone a notable modification; and in forty-eight hours the patient was out of danger. No other remedy was used, except an occasional dose of triturated Aconite, as became a rigid Hempelite.

I have also found Sanguinaria a leading remedy in tracheitis; and in the July number of the "American Homœopathic Observer" I recorded seven cases of diphtheritic croup successfully treated by this remedy.

By reference to the "gastric symptoms," as well as the above, it will be seen how closely the symptoms simulate those of Arsenicum, Phosphorus, and Tartar emetic. It will cure, according to Dr. Tully, "atonic, subacute, and chronic inflammations of the stomach." No remedy, however, is more decidedly homœopathic to acute *gastritis*. We have the terrible burning, the unquenchable *thirst*, the pain, *vomiting*, and prostration which mark that disease. In acute gastritis, the sixth or thirtieth should be used. In chronic gastritis the lower dilutions may be as useful. It ought to be useful in *ulceration* of the stomach.

Blood-root is fully indicated for *nausea*, or *vomiting from irritation* of the coats of the stomach. Allopaths have cured vomiting of food, or bilious vomiting, with small doses of the tincture. It is doubtless homœopathic to many functional and organic diseases of the stomach, and I would suggest its use in gastric disorders not amenable to the ordinary remedies. Dr. F. W. Hunt, in an article on "Dyspepsia, or Diseases of the Stomach," thus speaks of the virtues of Sanguinaria canadensis:

This is one of the most important remedies for various diseases of the stomach, throat, liver, lungs, etc. In almost every form of indigestion, for many years, it has given me satisfactory results. It is especially useful in deficient gastric secretion, with loss of appetite and periodic nausea; heartburn, nausea, and irregular chills; torpid state of the liver; dyspeptic headache, terminating by regurgitation and vomiting of bitter greenish fluids; soreness in the abdomen, increased by eating; feeling of heat in the stomach; chronic gastritis; red tongue, which burns as if from contact with something hot; lips red and dry; throat hot and dry; tickling at the entrance of the larynx, which excites cough; cough peculiarly severe, not relieved by expectoration, with pain in the chest and redness of the cheeks. When digestion is imperfect from deficiency of the true gastric fluid, when the food undergoes chemical decomposition, and gas is evolved in large quantities, Sanguinaria will generally change the action of the stomach, and digestion becomes more complete. When the mucous membrane is congested the flatus formed by fermentation is retained by a spasmodic constriction of the cardia. Its irritation is reflected through the pneumogastric nerve upon the lungs, exciting a feeling of "tickling" in the entrance of the trachea, with *sympathetic cough*. This peculiar, dry cough does not yield to expectorants, but often persists for hours, and is only relieved by eructations. Aromatics and stimulants fail to expel the gas. They only increase the erethism of the coats of the stomach. The Sanguinaria affords a better resource. It not only relaxes the constricted cardia, permitting the flatus to escape, but excites a healthy, homœopathic reaction on the whole surface of the fauces, œsophagus, and stomach, superseding the morbid state by a healthy one. Dr. Coe and others (allopathists) caution against the use of blood-root when there exist "gastritis and enteritis, and whenever we have occasion to suspect ulceration or abrasion of the mucous surfaces of the bowels." This caution suggests to the homœopathist that the medicine will cure such conditions, if administered in dynamic doses.

Dr. Fairbanks, of Chicago, reports the case of a patient, a woman, aged fifty-six, who had been subject to *pyrosis*, a rising of burning corrosive fluid from the stomach, with flatulence, for twenty years. She now gets prompt relief from the first attenuation of Sanguinaria, in pellets. It is the only remedy that will arrest a paroxysm.

Eclectic physicians claim that Sanguinaria has a specific action on the *liver*. The hepatic symptoms in the provings were collected from allopathic sources: Barton, McBride, and Tully. It is doubtful if they should have a place in the provings at all, as by reference to the original it will be seen that they were mere assertions of the above-named physicians, and *not* pathogenetic symptoms. It may not be amiss, however, to quote the statements of eclectics on this point. King says it has been used successfully in "jaundice and other hepatic affections. In torpid conditions of the liver it is very valuable." Jones asserts that it

"arouses the *liver* and glandular system in general." Coe admires it in "all cases of hepatic torpor, jaundice, biliary concretions, chronic hepatitis, etc." A curative symptom in the pathogenesis would seem to point to the spleen as the diseased organ, although it may have been the lung, or even a myalgic affection, accompanied with cough. It is said to have cured "*indurations of the abdomen,*" but no details are given, nor the name of the observer, and consequently we are at a loss to know the character of the indurations.

The blood-root does not generally purge unless given in large doses, hence it will not be found often indicated in *diarrhœa.* There is one variety of diarrhœa, however, in which it has been found curative by Dr. Bute, namely, "with the diarrhœa, termination of the coryza and catarrh," also, "the affection of the breast always ended with the feeling as if hot water were poured from the chest into the abdomen, which was followed by a diarrhœic stool."

The "*dysentery,*" marked as curative in the original proving, is merely an observation of Rafinesque (botanist). Some dysenteric symptoms, however, are found in the pathogenesis, which may be made use of.

Dr. Bute asserts its curative power in *hæmorrhoids,* but gives no special indications, nor do we find any in the proving. The last symptoms under "*stool*" would seem to be misplaced. It denotes either an affection of the left *ovary,* or was simply a myalgic pain.

Take it all in all, the so-called proving of Sanguinaria, as made up for the "Transactions of the American Institute," cannot be considered a commendable production. Some of the most notable of the symptoms marked (curative) were the mere assertions or theoretic deductions of allopathic observers, not verified by homœopathic physicians. I would advise the student or physician, before he attempts to use this drug upon the information obtained in that proving, to study the original, and judge of its merits for himself.

The first curative symptoms belonged originally to the following group reported cured by Dr. Bute, namely:

In a lady, pain in the left hypochondrium, which was rendered worse from coughing, but was better from being pressed, and by lying on the left side; very copious urination at night.

The whole group of symptoms may have been of renal origin.

According to Dr. Coe, Sanguinaria is very useful in many functional disorders of the *kidneys*.

Our provings are, however, too meagre to give us any clue to its action on those organs. I cannot ascertain who reported the curative observation of "*gonorrhœa.*" Dr. Coe advises it for chancres, buboes, secondary and tertiary syphilis, but says nothing of its use in gonorrhœa, nor does any other writer. I can readily imagine it might be useful in phagedenic chancre, used internally, and as a topical application.

It has been used successfully in *amenorrhœa*, especially when the *head* suffers from the non-appearance of the menses.

Dr. O'Connor (allopathist) writes:

For the last twelve years I have used Tincture of sanguinaria, exclusively, in cases of *amenorrhœa*, and have recommended it to others, who speak favorably of its effects. In that time I have treated as many cases of this disease as usually falls to the lot of a village practitioner, and as yet have no cause to find fault with the efficiency of the remedy. I consider it superior to Eberle's great remedy, the Tincture of polygonum hydropiper. I commence a fortnight before the expected return of the menses, and give teaspoonful doses of the tincture, three times a day, and a teaspoonful on going to bed (preceded by a warm foot-bath). If the secretion is not restored at the time, I remit the use of the remedy for a fortnight, and proceed as before. When the full effect of the remedy is produced, it is characterized by *slight nausea, pains in the loins, extending through the hypogastric and iliac regions, as well as down the thighs.* These symptoms sometimes manifest themselves once or twice before the discharge is completely established.

The symptoms which I have placed in italics are worthy of being noticed, as purely pathogenetic. I esteem the blood-root a good remedy in *suppressed menses*, but chiefly indicated when the suppression has been *followed or preceded by pulmonary disease.* Its use in such cases has generally been attended with good results.

Dr. Miller (eclectic) advises it in *dysmenorrhœa*, when occurring in torpid subjects, but says it is "contraindicated in patients of plethoric habit." This would indicate to us that it would be *primarily* homœopathic to dysmenorrhœa with plethora, and in dysmenorrhœa when the menses are too frequent, also when there is a tendency to congestion of the brain or lungs.

It is homœopathic to threatened *abortion*, when the symptoms mentioned by Dr. O'Connor are present, accompanied by some

hæmorrhage. It is used for a criminal purpose in domestic practice, and by unprincipled physicians.

Dr. Bute reports the following case cured by the blood-root: "A female, who had distension of the abdomen in the evening, and flatulent discharges, per vaginam, from the os uteri, which was constantly open, at the same time a pain passing in rays from the nape of the neck to the head." This was probably an instance of that rare disease in which the lining membrane of the uterus secretes a gas. Dr. Bute also reports cases of affections of women at the *climacteric period*, characterized by "burning of the palms of the hands and soles of the feet, compelling her to throw the bedclothes off the feet for the purpose of cooling them." Used internally and topically (by injection) it has cured *ulcerations of the os uteri, corrosive and fetid leucorrhœa, and polypi of the uterus.*

Sanguinaria has always had an extensive reputation for the cure of *cough.* The aborigines of the Eastern States often astonished the early settlers by the cures they effected with this remedy. It is said that the most obstinate coughs disappeared during the use of the blood-root. The physicians of an early day seem to have used blood-root more frequently than their successors. Rafinesque, Barton, Tully, and others, all assert its great curative power in many varieties of cough. They even assert its power to cure *pulmonary consumption.* Besides the above curative symptoms, the following are reported: "Cough, with coryza; then diarrhœa;" "tormenting cough, with expectoration and circumscribed redness of the cheeks." Several instances have come under my observation where the blood-root really appeared to cure *incipient phthisis.*

Eclectic physicians use it in thoracic diseases where the allopath considers Tartar emetic indicated. In this they are not far from the truth. Sanguinaria, in affections of the lungs, occupies a place midway between Phosphorus and Tartar emetic. It has many symptoms in common with both, and others possessed by neither. I have used the blood-root for many years in *bronchitis, pneumonia,* and other diseases of the respiratory organs, and have obtained from it some very satisfactory results. In the massive doses of the old school, given to nausea and emesis, it was productive of great injury, but in dynamic doses its use is never at-

tended with any aggravations; a few drops of the mother tincture may be used in some chronic affections of the pulmonary organs, while in acute diseases, with a high grade of irritation, the 3d is the safest and best attenuation. In the majority of cases of pneumonia, there occurs a group of symptoms for which we have generally used Phosphorus or Sulphur with good results, although the convalescence under those remedies was apt to be lingering. But when those symptoms and conditions are met with Sanguinaria, 2d dilution (decimal), or Sanguinarin, 4th trit., a rapid subsidence of the diseased action occurs. At the second, and during the existence of the third stage of inflammation, we have, as physical signs, dulness on percussion, bronchial respiration, etc., denoting the presence of red, or even gray hepatization, and purulent infiltration of the pulmonary parenchyma. Watson considers it doubtful whether recoveries take place from the third stage of pneumonia; but under homœopathic treatment I do not believe such recoveries impossible. The general symptoms indicating Sanguinaria are extreme dyspnœa, short, accelerated, constrained breathing, the speech ceases to be free, the sputa becomes tenacious, rust-colored, and is expectorated with much difficulty. The position of the patient is upon the back; there is not much pain in the chest unless the pleuræ are involved, and then it is of a burning, stitching character. The pulse is quick and small, the face and extremities inclined to be cold, or the hands and feet burning hot, with circumscribed redness and burning heat of the cheeks, especially in the afternoon. Under the use of this remedy the dyspnœa subsides, the bronchial breathing disappears, we hear afresh the small crepitation, first alone, then mixed with the natural respiratory murmur, which in its turn becomes alone audible. The sputum becomes again less tenacious, less red, but yellow and more like the expectoration of catarrh, and is expectorated in large, heavy masses; the febrile symptoms gradually abate, and a favorable convalescence is established. I give the medicine every two hours, generally alone, but occasionally in alternation with Phosphorus or Tartar emetic. In its powers over chronic bronchial or laryngeal coughs it rivals Lycopodium and Sulphur. It relieves, and often cures, "coughs with chronic dryness in the throat, and sensation of swelling in the larynx;

continual severe cough without expectoration, with pain in the breast and circumscribed redness of the cheeks;" "cough, with coryza, then diarrhœa." This last symptom is an important indication for the use of Sanguinaria. After a severe cold or undue exposure, some persons are attacked with coryza, catarrhal headache, severe pains in the chest, with tightness of breathing, and dry, harassing cough, all of which subside upon the recurrence of diarrhœa. In such cases Sanguinaria is eminently indicated, as it causes a similar group of symptoms. Dr. Morrow praises it very highly in *hæmoptysis*. In one case which came under my observation it seemed to correct the bleeding promptly. Cases have been reported to me where the tincture of blood-root cured spitting of blood which had resisted other means. It will undoubtedly be found useful in some cases of asthma, croup, laryngitis, and perhaps *pleurisy*, but we have no homœopathic testimony of its effects in those diseases.

Dr. Wolff claims to have used the 200th potency with success in "syphilitic pulmonary inflammation."

Dr. Tom Nichol, of Montreal, writing of its use in acute *œdematous laryngitis*, says:

In the sixth volume of the "American Observer" will be found an essay on acute œdematous laryngitis by the writer, in which he said: "I have never had an opportunity of testing the virtues of *Sanguinaria* in this disease, but would expect considerable from it." I have lately had the long-looked-for opportunity, and hasten to lay the results before the readers of the "Observer."

On Friday, April 17th, I was called to Mrs. C., aged fifty-nine, who had been complaining for some few days. I found an inflammation of the cervical glands of the right side, involving the parotid gland to a limited extent, and accompanied by extensive inflammation of the subjacent cellular tissue. The parts were hot, tender, swollen, and red,—in fact, the well known *calor*, *dolor*, *tumor*, *rubor*,—and there was reddening of the fauces, with slight pain on deglutition. I prescribed Belladonna, 6th decimal trituration, and advised rest, quiet, and silence. On the following day the situation was but little changed, and Mercurius iodatus ruber, 3d decimal trituration, was prescribed.

At 6 o'clock of Sunday morning, April 19th, I received an urgent call to the patient, who, I was told, had hardly been able to breathe all night. I found her sitting up in bed, with a characteristic sawing and rasping sound issuing from the larynx—a sound somewhat difficult of description, but which once recognized can never be forgotten. The tonsils and pharynx were swollen, but auscultation showed that the sawing and rasping sound issued from the larynx. The cough was dry and harsh, relieved by sitting up in bed, aggravated by eating and lying down, and it was accompanied by difficult expectoration of tough and glairy

mucus. The voice was low and suppressed, and it was with difficulty that I could make out the hurried, whispered sentences. The pulse was feeble and fluttering, and the lips were pale; but on both sides of the cheeks there was a circumscribed redness. The pathognomonic symptoms which made the pathological state quite clear to me was the fact that *expiration was performed more readily than inspiration.* M. Thuillier's test was decisive as to the diagnosis, for "when the forefinger was passed into the larynx, there is the perception of a cushion formed by the tumefaction of the sides of the glottis, a soft, pulpy body, quite distinct from the ordinary hard feel of the parts."

The diagnosis was acute œdematous laryngitis of the supraglottis variety—all the more dangerous because it was an intercurrent disease, and the peculiar respiration arose from the fact that the œdematous membrane which fills the glottis closes like a valve against the entrance of air, but readily permits it to pass out. I prescribed *Sanguinaria* 1st decimal trituration, a dose every half hour.

At 1 P.M. I found that improvement had commenced almost as soon as the medicine was given. The sawing and rasping sound was now much diminished, the respiration was comparatively easy, inspiration and expiration were performed with the same facility, the cough was less frequent and less severe, the voice was quite audible, and the patient had slept much of the time since morning. The tonsils and pharynx were still red and swollen, but the glottis was clear of the tense and rounded swellings present in the morning. Sanguinaria was continued in the same dose.

At 7 P.M. I again saw the patient, and found that the very serious pathological state had almost wholly disappeared. The Sanguinaria was continued all night, and in the morning, as the acute œdematous laryngitis was no longer present, treatment was directed against the inflammation of the cervical glands and cellular tissue.

I cannot leave this medicine without calling attention to the relationship between it and Chelidonium. It belongs to the same botanical family. Its chemical constituents are similar. Both contain *Chelidonin;* both affect the *liver*, the *right lung*, and the *right side of the head.* Both have *throbbing in temporal arteries;* and in both the *headache* and *prosopalgia* are *periodical.*

It would seem that the *Chelidonin* common to both plants was the agent which caused the above group of symptoms.

Chelidonium has no *Sanguinarin* in its composition. The former is the agent which most profoundly affects the liver; the latter seems to affect *both* lungs more intensely than the former, and has greater influence over the circulation, as in hæmoptysis.

I cannot omit Dr. Farrington's comparisons of these two remedies, which, although not as complete as I should like, will prove an excellent guide to their administration and their differential diagnosis.

CHELIDONIUM.	SANGUINARIA.
MIND, HEAD.	
Anxiety; must move about; *weeps and knows not why.*	Anxiety; *irritability; cannot bear to hear persons walk across the room.*
Headache from occiput to forehead, over right eye; periodical (Hale).	*Headache from occiput to forehead, over right eye; periodical;* worse from *noises,* light, stooping, motion, eating; better from lying still and after sleep.
Occiput *so heavy he can hardly lift his head;* pressure to the left ear; head worse from sneezing, stooping, open air; *better from eating* (F.).	
EYES, FACE, EARS.	
Pupils contracted.	Pupils dilated.
Profuse lachrymation with neuralgia, using eyes, and as a result of fistula lachrymalis.	Burning lachrymation as a symptom of catarrh, coryza, raw throat, cough, diarrhœa.
Rushing as of wind out of the ears. Deafness during cough.	Tinnitus from congestion; earshot; *oversensitive to noises.*
Mostly dry coryza, one side obstructed; or fluent, with thick blood in the morning.	Mostly fluent right-sided coryza; hot discharge, eye waters, throat raw, finally diarrhœa. Polypus.
Face yellow; gray, sunken, blue around the eyes. Face *dark red in pneumonia, capillary bronchitis.*	Face pale, swollen around the eyes; *bright-red circumscribed cheeks; or livid in typhoid pneumonia. Veins swollen.*
Supraorbital neuralgia; worse right side; copious lachrymation.	*Supraorbital right-sided neuralgia; relieved only by holding the head tight to the floor.*
MOUTH, THROAT.	
Toothache, worse in bed, better from cold water.	Toothache, decayed tooth, worse from cold drinks.
Tongue *narrow, pointed* (dyspepsia), furred.	Tongue *as if scalded;* coated white (loss of appetite).
Taste *bitter;* food tastes natural.	Fatty, slimy taste; sweets taste bitter.

On the throat the two remedies have but little similarity of action. *Chelidonium* inflames the fauces, but, as will be seen, its main action is on the larynx. *Sanguinaria,* on the other hand, causes ulceration of the mouth and fauces. Mouth, gums, and roof sore, burning; throat feels as if scalded, tonsils swollen, worse the right; pearly diphtheritic exudation; worse from swallowing sweets; throbbing in the head, red cheeks; distended temporal veins.

CHELIDONIUM.	SANGUINARIA.
STOMACH, ABDOMEN.	
Longs for milk, hot drinks, coffee; they agree.	Loss of appetite, with craving for piquant food.
Aversion to cheese, boiled meats.	Aversion to butter.
Gastralgia, with gnawing pains in the stomach, made better from continued eating.	Gastric catarrh, burning; tongue and lips red; throat hot; eating relieves the sensation of nausea.
Hepatic congestion, with sharp stitch pains; pains under the right scapula; clay-colored or *bright-yellow, thin stools;* colic from portal congestion, with great heat, contraction of the navel; headache behind the eyes and in occiput.	Hepatic symptoms less marked; *like a hot stream from breast to liver;* yellow stools less characteristic than in *Chelidonium;* colic, with much flatulence and torpor of the liver; *sick headache over the right eye;* nausea, vomiting of bile.
Stool *bright-yellow, thin;* or dry, in hard lumps; white, clay-colored.	Stool yellow, thin, undigested; *much offensive flatus; terminates the catarrh.*
URINE, GENITALS.	
Sharp, spasmodic pains in the kidneys and bladder; urine greenish (bile), or deposits red sediment.	Pain in the left hypochondrium, with copious, pale urine; urine yellow (bile); reddish sediment.
Menses too late, profuse and last too long; pain under angle of right scapula.	Menses too early; black, offensive blood; sick headache, from occiput over right eye.
Burning in the vagina periodically at the same hour.	Discharge of flatus from the vagina; climacteric changes.
Milk vanished.	Nipples sore, burn.
LARYNX, CHEST.	
Hoarse periodically every day, 5 P.M.; *dry, hard, spasmodic cough,* as from dust in the larynx; spasm of the glottis in expiration; constriction across the upper part of the larynx; worse in the morning (cough).	Aphonia, with swollen larynx; *rawness, burning; ulcers;* dry cough, ceases when flatus is passed up and down, *or as soon as diarrhœa ensues; wheezing, whistling cough;* worse at night and lying with the head low.*

* *Sanguinaria* corresponds more to inflammation and ulceration; *Chelidonium* offers more spasmodic symptoms. *Sanguinaria,* with its peculiar cough, has cured croup (J. B. Bell), and is similar in pseudo-membranous croup to *Kali bich.* (Nichol.)

CHELIDONIUM.	SANGUINARIA.
LARYNX, CHEST.	
Pneumonia or capillary bronchitis, with bilious complications; loose rattling cough; *bright-yellow, thin diarrhœa;* in severe cases, dark-red cheeks, great dyspnœa, with fanlike motion of the alæ nasi, *one hot and one cold foot.*	Pneumonia, with marked vascular disturbance; rust-colored sputa; little pain or simply burning; *circumscribed red cheeks;* great dyspnœa; in severe cases, livid face and hands; quick, small pulse, weak feeling at the heart; extensive hepatization.*
Heart beats so forcibly as to raise the clothing (bilious complaints).	Palpitation violent, felt in the head, constriction of the stomach, *deathly nausea.*
Pulse full, hard, but not much accelerated; or small and rapid (capillary bronchitis).	Pulse frequent, full; or quick, small; frequency and force reduced (pneumonia).
BACK, LIMBS.	
Pain under the angle of the right scapula.	Pressure and pain along the inner border of the left scapula.
Rheumatism not so well marked as in *Sanguinaria.* Tearing pains, parts will not bear the least touch; sweat gives no relief.	Rheumatism, especially of the *right deltoid,* muscles of the back; parts sparsely covered are sensitive to touch; sweat relieves the pains; pains shift.†
Nails blue, joints of the fingers yellow, cold.	Livid hands (pneumonia); roots of the nails ulcerate one after the other.
One foot cold, one hot (pneumonia).	Feet generally burn.
SLEEP.	
Sleepy, yet cannot get to sleep.	Restless, dreamy sleep; awakens frightened, as if falling.
FEVER.	
Irregular circulation; dark-red face; one cold, one warm foot; one ear cold, one warm; palms hot; veins of hands and arms swollen.	Irregular circulation; hectic red cheeks; hot streaming from chest to abdomen; flushes of heat at climaxis; feet, hands burn; veins swollen, especially temples.

* It is now known that one great danger in pneumonia is heart failure. The symptoms of *Sanguinaria* point to its use in just such an emergency.

† *Sanguinaria* is an excellent remedy in acute rheumatism, worse from motion, at night; pains are throbbing, burning, and there are spasmodic pains in the joints. When metastasis to the heart occurs from external application to the affected joints, *Sanguinaria* or *Kalmia* (according to Hering) will be of great service.

CHELIDONIUM.	SANGUINARIA.
FEVER.	
Chilly in the open air, even in summer.	Chilly and hot alternately.
Heat with the colic; heat with *dark-red* cheeks; cold feet; short breath; nausea.	*Flushes of heat;* hectic with *bright-red* cheeks; nausea, sick headache; dyspnœa.
Sweat ceases on waking.	Profuse sweat; cold sweat.
GENERALITIES.	
Itching, with jaundice.	Itching precedes the nausea.*
Old, putrid, spreading ulcers (Lippe).	Indolent ulcers, no pain, dry, sharp-cut edges (W. Wesselhœft).

NITRATE OF SANGUINARINA.

This preparation is a very fine brownish-red powder, pungent, acrid, bitter, and inodorous. Soluble in Alcohol, Ether, water, and oils, but not in all proportions. I find upon experiment that both Alcohol and water separately will dissolve about one-half grain to each one hundred minims, while dilute Alcohol (equal parts of Alcohol and water) will dissolve about one-fourth of a grain more, each solvent giving a very fine brownish-red solution.

Pure Sanguinarina is a *pearly-white* substance, but when combined with any of the acids the result is a salt with some shade of red, crimson, or scarlet. From this fact it would appear that the red color of the blood-root may be owing to the presence of some native salt of Sanguinarina, which is decomposed by Ammonia in the separation of the organic alkali.

The centesimal scale would appear to be the best for this remedy, as in the low decimal attenuations it would produce local irritations of the mucous membrane. It is best prepared by triturations up to the third; then it can be carried higher in Alcohol.

The following pathogenesis is taken from provings reported by Professor Owens, of Pulte Medical College, Cincinnati, at the meeting of the American Institute, held in 1878.

Head and Neck.

Pain in the supraorbital region, proceeding from pain in the right eyeball, of a sore, aching character. It soon extended across the forehead, and seemed to be

* Bute proposes *Sanguinaria* as the quickest antidote to *Rhus radicans.*

deep in above the root of the nose. Burning pain in the forehead and the root of the nose, with aching and soreness in eyeballs, worse on pressure; the *pain became more severe on the left side of the head, through the left temples.* Slight aching sensation, with soreness all over the head and scalp. Slight dizziness through all of the proving.

The pain in the left side extended to parietal ridge and back to mastoid process, attended with sensation of stiffness in the muscles of left side of the neck and top of left shoulder, as if from exposure to a draft of cold or damp raw air. *Sensation of obstruction and fulness in head,* which was relieved by a discharge of a large quantity of thick, yellow, sweet-tasting mucus. Heat in the forehead; bathed in warm water gave some relief. Uncomfortable feeling about the head all day; decidedly worse at night.

Eyes.

Pain in right eyeball, extending to the supraorbital region; pain of a sore, aching character. *Profuse lachrymation;* the tears gush from the eyes. *Dimness of sight,* as if looking through gauze or mist, as if a thin film of mucus was spread over the sight. Redness and soreness of the inner corners of the eyes, which feel as if swollen. *Pain in the left eyeball,* extending over the orbit and left side of the head. Redness of lids and conjunctiva. *Heat* and *burning* of the eyes, which was quite severe. Burning, pressing, aching, and sore pains in the eyes.

Ears.

Obstruction of the Eustachian tube; difficulty in distinguishing sounds; roaring in the right ear.

Nose.

In fifteen minutes after taking first dose observed water trickling from right nostril. *Watery mucus flowed freely from both nostrils,* attended by violent *sneezing,* repeated every few minutes, with profuse lachrymation. Sensation arising to nostrils as if he had taken strong horseradish. *Burning pain in both nostrils. Accumulation of mucus obstructing nose* and bronchial tubes. Dry, sore, and raw feeling in nostrils. Free *discharge from posterior nares, tinged with blood,* especially from left side.

Mouth and Fauces.

Bitter taste extending back to the root of the tongue. Slight acrid, burning sensation on the tongue. Roughness and dryness in the mouth and throat, with sensation of constriction in the throat, which passed off in fifteen or twenty minutes. Increased flow of mucus and saliva, with sneezing and burning in the forehead. *Soreness, roughness, and rawness on right tonsil, painful, with difficulty in swallowing,* as if the throat indicated diphtheria, but on examination there was only a red and irritable spot.

In the morning *raised great quantities of thick, yellow, sweet-tasting mucus.* This continued all day. Heat in the mouth, as if pepper had been taken. *Great accumulation of mucus in throat and bronchi.* Awoke frequently with dry mouth and

throat, from breathing with mouth open, the nose being obstructed. Everything tasted dry, like chips. Coffee did not taste natural; wanted something succulent—not pungent—but soothing to the mouth and throat, which was hot, dry parched, and raw.

Chest.

Heat and tension behind centre of sternum; sensation of tightness in the chest, inducing a short hacking cough; the cough became harsh, leaving soreness and rawness in the throat and chest, with scraping raw sensation in pharynx. Coughing up large quantities of thick, yellow, sweet-tasting mucus several times during the day. Tension, burning, and accumulation of mucus behind centre of sternum. In forty minutes after taking, the tension and heat behind the sternum had increased, with desire to cough, a short hacking cough; raised a clear mucus; felt a strong desire for fresh air; slept poorly on account of pressure in chest; the cough became deeper and rattling; the pressure extended to both lungs, greatly increasing the sense of suffocation; feeling as if the air-passages were lined with thick, stiff mucus or pus.

Stomach.

Sensation of burning in stomach and œsophagus. Belching up of putrid-smelling gas, though she had eaten nothing since morning. Little appetite.

Urinary.

Passed urine nearly every hour during the night, which on standing until morning weighed twenty-eight ounces and deposited a white sediment.

Abdomen.

Borborygmus and pains in abdomen, as if diarrhœa would set in, with sharp cutting pains.

The following clinical verifications were also reported:

CASE I.—I. I. B.; merchant; aged forty; dark complexion. Chronic posterior nasal catarrh, chronic bronchitis, and chronic laryngitis; voice altered, deep, hoarse; catarrhal phonation, as if speaking from the chest with effort; severe pressure from behind the sternum. Had been thus affected for eight years past. Had been treated by various physicians in Cincinnati, Philadelphia, and New York, using inhalations of various substances, Tartar emetic ointment, and Croton oil at various times, without benefit, leaving the surface only dryer than before. He seldom raised anything except a few balls of gray mucus.

From New York he was advised to go to the pine regions of the South, particularly to Florida. He spent two winters on the St. Johns River, with, for the time being, some relief; but each time the trouble returned again in the North.

Through persuasion of a friend he was induced to try homœopathic treatment. Nitrate of sanguinarina, 6th trituration, was given, one grain every two hours. All hot and stimulating drinks and food were interdicted. He had already in

one year lost eighteen pounds in weight, and his relatives, who were all strongly opposed to his change, said he then would surely die. In one week he reported that his throat felt better and that there was more moisture in it than there had been for two years before. There was also marked improvement in his voice. In ten days he received his third prescription: Nitrate of sanguinarina 6th, one-grain dose every four hours. Improvement was now apparent to all. He was urged to take all the exercise in the open air that he felt he could during the autumn. At the end of ten weeks he had regained six pounds of his loss, and felt stronger and better than for five years before; voice not improved in proportion; gave Causticum 6th every two hours for one week, and Drosera 3d. In sixteen weeks from the time he took the first dose he reported himself a well man, and endured the winter without any unusual trouble.

CASE II.—Mrs. S.; city missionary; aged forty-nine; much exposed to severe weather; daughter of one and sister of two allopathic physicians; was by the patient I. I. B. prevailed upon to try this medicine. She had a constant hacking cough, raw, sore feeling in the throat, and sore aching and pressing behind the sternum. She was constantly exposed to the raw, cold winter winds, which induced coryza and irritation. Her occupation required that she should talk a great deal under all conditions of exposure. I gave her one-grain doses of the 6th trituration every two hours, required her to rest a few days in the house during very stormy weather, and to avoid exposure at night. In ten days she reported herself decidedly better. She continued her occupation without further interruption, until at the end of ten weeks her recovery was complete.

CASE III.—O. W.; aged fifty-five; subject to frequent attacks of cold, affecting the head, throat, and bronchia, and catarrhal affections.

January 20th, 1878, contracted a severe cold from a long drive in an open buggy. This cold affected the head, throat, and lungs; felt very sore and lame all over, with copious discharge of mucus from nose; frequent sneezing; lachrymation. On the 21st soreness of throat very marked; constant tickling in the throat-pit, exciting cough, at first short and hacking, but in two days became violent and convulsive. Bell. and Drosera seemed of little use. On the 22d pressure behind the centre of sternum became very severe. Gave Nitrate of sanguinarina 6th every two hours. In four hours a copious perspiration made its appearance, attended with frequent sneezing. On 23d soreness of the throat appeared in the morning after waking from a rather troubled and restless sleep; constriction of the throat, with difficult deglutition, was present; tension across the chest, which seemed to radiate from behind the sternum.

I gave the medicine every hour, and in one hour a quite free discharge from the nose set in, followed in three hours by moisture and relaxation of the constriction across the chest. The discharge was quite yellow and sweetish-tasting. This continued all day. At night he slept well, and awoke in the morning feeling quite free. But little cough or coryza during the day, and he was entirely relieved by the next morning.

OBSERVATIONS.

It is evident from a study of the above pathogenesis that we cannot expect to obtain from the provings of the isolated constit-

uents of drugs, or the salts of other alkaloids, all the symptoms which we could obtain from the whole drug. I am convinced from a study of the provings of alkaloids and resinoids, also from their use in disease, that we should have provings of them all. Sanguinarina cannot represent the whole of the medicinal power of the root of Sanguinaria, for the root is a complex substance, and contains in addition to Sanguinarina another alkaloid called Porphoroxin (Huseman), also Puccin (Wayne).

It also contains Chelidonic acid, Sanguinarinic acid, besides resin, gum, and other inert substances. The alkaloids exist in the root in combination with its acids, the most important compound being Chelidonate of sanguinarina.

A proving of a trituration of the root, if fresh, will give us a complete pathogenesis of the whole, and probably a hydro-alcoholic tincture of the fresh root would be as good. But if we are to use any of its isolated constituents or their salts, we should have them proven. In practice I find that there are many *head*, *hepatic*, and *uterine* symptoms which will not yield to the Sanguinarina, or the nitrate, but when I prescribe the nitrate for any of the above symptoms from Dr. Owen's provings, they disappear promptly.

Dr. Newman, Lecturer on Pharmacology and Medical Chemistry in the Chicago Homœopathic College, arranged the above symptoms with excellent judgment, with a few hints from myself, relating to the importance of keeping *connection* of the above symptoms. Further proving is needed, especially upon women; also some pathological provings on animals.

The *hepatic* symptoms of Sanguinaria are probably due to Chelidonic acid it contains, for we miss them in the nitrate; as also some of the *head* symptoms of Chelidonium, which appears so prominently in Sanguinaria.

Many of the local symptoms of the nitrate referred to the nasal passages, throat, and larynx, were doubtless due to its local irritant action. They are, however, of value in practice as guides to the local application of the triturations by inhalation.

A medical friend suggested to me whether any of the symptoms of the nitrate could be due to Nitric acid. This query brings up a question which is going to be a puzzling one for our school.

We may ask, (1) What becomes of the Nitric acid? (2) Is it separated from the alkaloid in the stomach as free Nitric acid? (3) Do we get mixed symptoms of Nitric acid and Sanguinarina? or (4), Do we get an entirely unique array of symptoms from this salt? I cannot answer these questions. Possibly some scientific chemist who also understands symptomatology may some time answer them.

A few words as to the use of this salt: Locally it is very useful to *repress exuberant granulations on ulcers*, or *diseased mucous* surfaces. The nitrate is so powerful, that the third trituration (decimal) is sufficiently strong to effect a change for the better, acting homœopathically, for the undiluted salt applied to a healthy surface causes ulceration with abnormal granulations.

Used locally as above, and at the same time internally, it is of value in *polypi* situated in the *nose*, *uterus*, or *urethra*.

This salt, as well as the Sanguinaria, is doubtless indicated in *irritation of the coats of the stomach*, even to the extent of *acute gastritis*. But its chief value will be found to be in the treatment of *catarrhal headaches* (possibly also nervous gastric headaches), *nasal catarrh*, *conjunctival catarrh*, *catarrhal disease of the inner ear and Eustachian tube*, *pharyngitis*, *laryngitis*, *bronchitis*, and possibly in *broncho-pneumonia* or *pneumonia in the stage of hepatization*. Nor should I hesitate to prescribe it in the *chronic bronchial catarrh of old people and children*, *nor in croup*, *catarrhal or pseudo membranous*.

But until we have further provings we are not justified in using it unless experimentally in the treatment of *hepatic* or *intestinal* disease; in uterine affections, or in disease of the male genital organs, characterized by impotence or relaxation from diurnal losses of semen, or irritability, causing inaptitude for coitus, for which conditions the tincture of Sanguinaria is so useful.

SANTONIN.

This powerful agent has superseded the Oil of wormseed. Both are prepared from the plant which is called in our Materia Medica "Cina." It has a double action when given to the human subject. It is a direct poison to any intestinal parasite

with which it comes in contact, and at the same time it exerts a powerful effect on the general system.

You are probably aware that Hahnemann's provings of Cina developed the curious fact that its pathogenetic symptoms simulated in a wonderful manner the symptoms caused by the irritation of worms.

The same may be said of Santonin, which gives it a double value, for, when given in appreciable doses, it destroys the parasites which are causing the direct and reflex irritation, and at the same time acts dynamically in removing those irritations by its homœopathicity.

In cases where it is necessary to expel as well as to destroy the worms in the intestines, it is advised to give it mixed with Castor oil. I remember to have seen in Braithwaite's "Retrospect" an account of some very interesting experiments, for the purpose of ascertaining the relative toxic power of various anthelmintics.

The Santonin was tested, with many other drugs, and it was found that when it was dissolved in Castor oil, in very minute proportions, it destroyed the life of the common round worm sooner than any other agent. The time occupied was but a few minutes.

As I have stated in Volume I, the Santonin is one of the most powerful *parasiticides*, and will destroy the life of almost any species of intestinal worms. It seems to have the most decided power over *lumbrici* (long, round worm); less on *oxyuris* (pinworm), and least on *tœnia* (tapeworm).

For the destruction of *lumbrici*, no better remedy is known. Two or three grains of the *one-tenth* trituration should be given in a spoonful of sweetened milk, at a time when the stomach is empty, as before each meal, or, in infants, before nursing. For young infants, the 2d and 3d triturations should be prescribed. A few days of this treatment will remove the worm symptoms. It must not be expected that the worms will be seen in the evacuations, for when they die in the stomach they are *digested*. If the child has diarrhœa, then the worms, or portions of them, may be discovered in the alvine evacuations.

In some cases of *oxyuris*, Santonin will prove useful, but it should be injected into the rectum, as well as given by the mouth.

It is a late discovery, that if injections of warm lard are used for a few nights the pinworms disappear—their propagation is arrested. If a few grains of Santonin, in the lowest trituration, is added to each injection of lard (one-half or one ounce), the destruction of these parasites is rendered still more certain. I do not know that this medicine has ever destroyed a *tapeworm*, although instances may have been placed on record.

You will often meet with cases in practice where children present symptoms which resemble those caused by worms, yet no worms have ever been discovered in the evacuations. Some of these symptoms simulate cerebral irritation, and it will not be safe to give material doses of Santonin, unless you are *certain* that such symptoms are actually caused by worms, for Santonin, in large doses, has caused intense cerebral irritation, with spasms.

In such cases give this medicine, or Cina, in the high or middle attenuations. The 10th of Santonin is about equal to the 3d of Cina.

By consulting the symptomatology of Santonin you will see that it presents a magnified picture of the pathogenesis of Cina, and may be used instead for more serious symptoms.

Santonin is homœopathic to many other conditions and disorders than those caused by or which simulate the effects of worms.

It has been used successfully in some forms of *headache*, with vomiting and delirium, and in *cerebral congestion*. It may prove useful in cerebral and cerebro-spinal meningitis.

It affects specifically the eyes, causing singular abnormalities of vision, which you will find described in Volume I.

Dr. Rose, of Berlin, who has experimented largely with Santonin, says these abnormal deviations of sight are caused by "an altered perceptivity in the nervous organ of vision itself," *i. e.*, a dynamic effect.

Its homœopathic relation to disorders of the internal eye is proven by the fact that it has been found to be curative in *amaurosis* and *blindness*. In the reports of an English hospital it is recorded that Santonin cured many cases of "*nervous* failure of sight."

It appears that the discovery of this curative power was accidental. An old man, quite blind, was given Santonin for worms.

Under its influence his sight partially returned. This led to its administration in thirty-six cases of weakness of vision, or, as the writer terms it, "nervous failure of sight," a kind of paralysis of the optic nerve. Of the thirty-six cases twenty-seven recovered more or less perfectly, the rest were not much benefited.

It was also used in nine cases of *cataract*, of which four were cured, the rest not benefited.

It has cured many disorders of the urinary organs, namely, *urging to urinate at night; enuresis nocturna; dysuria; strangury; chronic cystitis;* chronic *catarrh of the bladder.* In this last affection it has made some very brilliant cures. You will find it useful in *infantile remittents,* whether from worms or from ordinary gastro-enteric irritation. Lately the Santonate of soda has been much used in place of Santonin. It has the advantage of being more soluble in any menstruum.

SCUTELLARIA LATERIFLORA.

This plant is, in the domestic practice of this country, what Valerian is in the domestic practice of Europe. Its calming or sedative effects on the nervous system have been known ever since the settlement of New England. In the original botanic school it held a very high place as a remedial agent. Dr. Beach has published many cases cured by its use. Rafinesque quotes Barton and many eminent physicians of his day, who extolled it highly in all diseases of the nervous system. Dr. King says:

> Scullcap is said to be tonic, nervine, and antispasmodic. This is one of those valuable agents which a certain class of physicians consider inert; yet it has proved especially useful in chorea, convulsions, tremors, intermittent fever, neuralgia, and all nervous affections. In delirium tremens, an infusion drank freely will soon produce a calm sleep. Where teething has impaired the health of children, an infusion may be given with advantage. The Scutellaria is one of our most valuable nervines and tonics, and is especially useful in cases of *depression of the nervous and vital powers after long sickness, overexercise, excessive study, or from long-continued and exhausting labors.* One grain will frequently produce its quiet and soothing effect, controlling *nervous agitation,* and inducing a sensation of calmness and strength.

Dr. Scudder has a high estimate of its powers. He writes:

> It has been found remarkably efficacious in *chorea,* or *St. Vitus's dance.* Dr. Beach states that he has cured a great number of cases with it. We have used it

in several instances with apparent benefit. In cases of great nervous excitement, with severe tremors, also in attacks of *delirium tremens*, it has in several cases afforded prompt relief.

It has been extolled in many of the nervous and spasmodic affections so very common among women. It has attracted much attention in *hydrophobia*, and at one time it enjoyed a high reputation in the treatment of that formidable disease, although the same reliance is not placed on it that was some years ago; still, it is resorted to, both as a prophylactic and curative agent, in cases of canine madness. Testimony is not wanting to establish the fact that many persons have been bitten by rabid animals, and avoided the development of the disease by the free use of Scutellaria; while others, bitten at the same time, by the same animal, became hydrophobic. So many circumstances may concur to prevent the inception of the canine virus at the time of the bite—as the interference of clothes, or the speedy removal of it from the parts bitten, and thus preventing it from being absorbed—that we must view many of the cases said to have been cured by the exhibition of this article as highly equivocal. "A physician bitten by a mad dog, has assured me," says Rafinesque, "that himself, alone, had avoided the disease by using it, while others bitten by the same dog died."

Dr. Vandesveer, who is said to have introduced it to the notice of the profession in 1772, or, rather, to have discovered its prophylactic powers against hydrophobia, is said to have prevented four hundred persons and one thousand cattle from becoming hydrophobic; and his son is said to have relieved or cured forty persons who had been bitten, by the use of the same agent. These favorable reports of its efficacy are strongly questioned, and even denied by eminent physicians, while many of the botanic school report very favorably of its efficacy in that disease. It would seem that there ought to be some grains of truth among so much testimony. My observations have not fallen upon any such cases; but in one patient to whom I gave the Scutellaria, the first decimal, for a nervous affection, its administration was always followed by the symptom, "spasmodic or constrictive closing of the jaws, and a tightness of the muscles of the face." A proving might elicit symptoms which would account for its efficacy in hydrophobic conditions. I have used it successfully in several cases of *tremors*, and *twitchings* of the limbs in typhoid fever; also in mild form of hysteric spasms, and nervous irritation in pregnant females, etc.

For my estimate of the general therapeutic and pathogenetic effects of this plant I would refer the reader to my notice of the Cypripedium pubescens; not that I consider these two remedies as possessing identical properties, but they are such close analogues, and affect the system in such a similar manner generally, that many of my remarks applied to Cypripedium will be applicable to Scutellaria. I have used the latter in diseases of children, and affections of the nervous system, similar to those in which I recommended the former, and with like good results. That a careful proving would elicit different symptoms I do not doubt.

If I were to attempt a differential estimate of the two remedies I should say that the Scutellaria affected the spinal cord more, and the brain less, than the Cypripedium. I believe this statement will be verified by experience and observation.

Professor Paine remarks of Scutellaria as follows:

It appears to manifest itself more particularly upon the gray nerve-tissue, and hence it is adapted to, and exerts a wonderful power in, most of the difficulties which originate in a pathological condition of this structure. All forms of *chorea* are promptly relieved by the proper use of this drug; in fact, it may be correctly pronounced a specific for these affections. I have tested it in every form of this affection, and if used persistently and judiciously in combination with such adjunct remedies as the constitution may indicate, it manifests a most wonderful power. It is of great virtue in fevers, and other affections where the gray nerve-tissue has undergone partial degeneration and disintegration, or where the nerve-force is impaired by this peculiar pathological change. Thus in *subsultus tendinum*, following fevers, in delirium tremens, and other spasmodic affections, as *epilepsy*, *catalepsy*, hysteria, etc., this remedy, combined with Iron, is of vast importance. It is of great value as a tonic to the nervous system, where there is a general nervous debility, either from uterine disease or other constant irritations of the nervous system. I have used this remedy extensively in all female diseases, hepatic difficulties, and other chronic affections that influence the nervous system, and by uniting it with Iron have found it to afford most prompt relief. My method of administering it in the low forms of fevers is to compound one or two grains with one grain of Hypophosphite of soda, and give a powder four or five times a day. In hysteria, epilepsy, catalepsy, and other spasmodic affections of that class, I give it in stronger doses. I have cured some most obstinate cases of epilepsy by giving four or five grains, with equal parts of Carbonate of iron, every two or three hours during the day, followed by occasional purges. Some most remarkable cases of hysteria have promptly yielded to two grains of Scutellaria, administered three or four times a day in combination with chalybeates. In chorea, one grain combined with one or two of the Carbonate of iron, every two or three hours, baths, friction, and well-regulated diet, most promptly relieves, and where it is judiciously administered results in a permanent cure. This remedy has also been used to allay general nervous irritability; and I have frequently prescribed, where there is a want of sleep or restlessness manifested on the part of the patient, one or two grains of Scutellarin at bedtime, with one or two grains of the Prussiate of iron, and have found it to manifest quite as soothing an influence as Opium or Morphia.

Dr. Coe, another eclectic author, says:

We have found the Scutellarin a remedy of great value in the treatment of *coup de soleil*, or sunstroke, particularly when the case has become chronic. We have met with entire success in many of these cases by the use of Scutellarin and Podophyllin. In the treatment of epileptic convulsions, as soon as we have secured a remission of the attacks by means of Gelsemin, we employ the Scutellarin

with the Gelsemin as a radical remedy. We have used Scutellarin with benefit in threatened trismus, tetanic cramps, and other spasmodic disorders.

Since the appearance of the first edition of this work I have used this medicine quite extensively in diseases of children, when there was sympathetic or idiopathic irritation of the nerve-centres. In some instances it failed to manifest prompt curative effects; in others it ameliorated symptoms which Coffea did not reach. In my second edition I wrote:

I am disappointed in not receiving any clinical testimony from the members of our profession relative to its use. This may be owing to the absence of a proving, and to the fact that our school are averse to using a medicine empirically. I believe it to be better to do so, however, than to use Chamomilla, Coffea, and Belladonna, in a careless, routine manner, for the nervous affections of children and adults.

When my third edition appeared, it had been very largely and successfully used.

It has now been fifteen years since I commenced using the Scutellarin, and every year increases my confidence in it as a remedy in many of the disorders of delicate, nervous subjects. Not only have I found it useful in *sleeplessness, night-terrors, hysteria, delirium tremens,* and *nervous agitation from pain,* or *exciting emotions,* but it is valuable in *cerebral irritation in teething children,* or from *intestinal irritation.*

I am glad to say that the homœopathic school are now using the remedy very extensively and satisfactorily.

In a proving by Dr. Gordon many important symptoms were evolved.

That proving shows conclusively that the Scutellaria is by no means an inert or feeble plant. It evidently caused considerable derangement in the central nervous system. (See Symptomatology.)

We note several important symptoms evolved, which seem to substantiate its alleged value, and prove it to be homœopathic to the symptoms for which it has been especially used.

(1.) The nightly restlessness; sudden wakefulness; frightful dreams.

(2.) The headache, one form of which, while it was apparently

congestive, was probably nervous derangement. It resembles very much the cephalalgia of Cimicifuga.

(3.) The irregular action of the heart is due probably to derangement of the cardiac plexus. In the cerebral diseases of infancy, this irregularity is often noticed. It may prove useful in angina pectoris.

(4.) The tremulousness and twitching of the muscles show it homœopathic to chorea and nervous jactitations.

I have used Scutellarin 1x in many cases of *cardiac irritability, nervous palpitation*, etc. It somewhat resembles Lycopus, but has not its *depressing* action, while it has greater power over the *hyperœsthesia.*

SENECIO AUREUS (var. GRACILIS).

This indigenous remedy has become quite popular with a portion of our school. It is one of those plants which has gained its common name from its regulating power over certain uterine disorders. It is known to the common people by the name of "female regulator." It is even said that the Indian name "Uncum" means the same.

Its sphere of action is mainly upon the *mucous system* and the *nervous system.* Specially, it has an affinity for the *generative organs of both sexes,* the *urinary organs,* and the *bronchial mucous membrane.*

Although its influence on the nervous system is not mentioned by any writer, yet my observations have convinced me that it ranks with Coffea, Chamomilla, Valerian, and Ambergris, and it is in many respects a "nervine." It has been suggested by those familiar with its use, that it acts as a nervine by subduing the irritation of the uterine organs, and thus prevents the nervous irritation which might have been of a reflex character. This may be the true explanation of its action. It has a great reputation among the country people, who designated it "Wild valerian." They use it extensively for nervousness, hysteria, lowness of spirits, and sleeplessness, especially when these conditions occur in females. It has the following suggestive symptoms:

About the middle of the afternoon, sensation as if a ball was in the stomach, rising up into the throat, lasting for about an hour; sensation of tightness in the throat, with a disposition to attempt to relieve it by swallowing.

I am strongly impressed with the idea that this remedy acts upon the mucous tissues similarly to Pulsatilla. It causes increased secretion from the bronchial, intestinal, and vaginal mucous membranes, and has been found curative in abnormal conditions characterized by mucous discharges. It seems to me to be indicated when a catarrhal affection has appeared in one organ, and caused, or is consequent upon, the suppression of natural discharge in another; thus, profuse leucorrhœa, or a bronchial and even a nasal catarrh will set in upon the suppression of the menses, or appear in place of the menses. A catarrhal diarrhœa often appears at such times. It is in these conditions that Pulsatilla and Senecio prove so successful as curative agents by curing the catarrhal discharge and permitting the natural functions to appear. The Senecio has also proved useful in hæmorrhages from mucous surfaces, appearing upon the suppression of habitual discharges.

A catarrh was cured by the proving of the drug. It has the following symptoms:

Sense of fulness in the nostrils, with excessive secretion of white transparent mucus in the nostrils and bronchi; sneezing; hoarse, but the trachea and bronchi seem to be clear; sense of fulness in the nostrils, but no mucus; sneezing and sense of fulness in the nostrils, relieved after awhile by a copious flow of mucus; frequent hawking of tough, white, transparent mucus; secretion of mucus in the nose and trachea; sense of burning and fulness in the nostrils, with a little mucus; coryza.

The symptoms of the digestive tract would seem to indicate that it will prove of value in catarrhal affections of the stomach and bowels, in catarrhal *diarrhœa* or *dysentery*, and the latter stages of *mucous enteritis*.

This medicine has long had an extensive reputation in domestic practice as a diuretic, and used as such in cases of dropsy, suppression of urine, and irritable bladder. Eclectic writers say:

As a diuretic it has been employed with advantage in calculous affections, to subdue the irritation.—SCUDDER.

It is said to be diuretic and specific in strangury.—KING.

In those anasarcous states which attend chlorosis, or attacks of women at the climacteric age, and seem to be caused remotely by some disorder of the generative organs, the Senecio gracilis may

prove a very efficient remedy; also in ovarian dropsy, or dropsy occurring after suppression of the menses.

To illustrate its action, I quote the following cases reported by Dr. A. E. Small.

CASE I.—A young woman applied for relief of dropsical symptoms, namely: abdomen much enlarged, very tense, with an evident large amount of water in the peritoneal cavity; lower extremities very œdematous; urine quite scanty and high-colored—not more than eight ounces a day; considerable pain in the lumbar region, and in the ovaries. With the exception of constipation, no other abnormal symptom was manifest. Upon examination with the speculum, the cervix uteri was somewhat congested, and there was present albuminous leucorrhœa, but uterine pain was not much complained of, only a sense of weight, which may have been due to the peritoneal effusion.

Apis mellifica 2d was prescribed and taken for a week with no benefit, except to relieve the ovarian pain.

Apocynum cannabin $\frac{1}{10}$th was also taken for a week, but, contrary to its usual effects, it did not seem to increase the amount of urine.

Senecio aureus was then prescribed, ten drops of the $\frac{1}{10}$th in water every four hours. In two days the urinary secretion was up to its normal amount, and the œdema, ascites, and the lumbar pain diminished rapidly. The peritoneal effusion did not altogether disappear, nor did Arsenicum remove it completely.

CASE II.—A woman about thirty years of age had the following symptoms, which had increased since their accession, six weeks before: Face bloated, abdomen enlarged, feet œdematous; urine alternately profuse and watery, or dark-colored and scanty; frequent desire to urinate, day and night. No other abnormal symptoms of importance. In this case Senecio aureus was prescribed at once, without trying other remedies. Ten drops every three hours (mother tincture) for two days; then three times a day for a week, effected a cure.

This remedy has also been useful in my hands in the dysuria of women and children, when the symptom was evidently of a catarrhal origin. In dysuria, associated with uterine displacement, it is often useful. The presence of a mucous sediment in the urine is an indication for its employment.

CASE III.—Mrs. H., aged about thirty, of lymphatic temperament, had been suffering from chronic inflammation of the neck of the bladder for six years, from which she had received only temporary relief from treatment. At times she suffered greatly from tenesmus of the bladder and urging to urinate. She supposed herself to be afflicted with the gravel, as she sometimes passed *bloody urine*. *Senecio aureus* was prescribed, one drop of tincture, which she took at intervals of six hours for several days. She felt sensible relief from the difficulty after using the remedy two days. She continued its use for several days after, when she found herself entirely free from the suffering. She discontinued the medicine, and was agreeably surprised at the non-return of the difficulty, as it had before done after temporary relief. She had no indications of return for several months, when some exposure occasioned its reappearance. The remedy was again resorted to, and prompt relief was obtained. She has remained entirely well of the disease since—a period of eighteen months.

CASE IV.—A gentleman of nervo-sanguine temperament, aged about fifty, had been subject to renal inflammation, affecting particularly the right kidney, causing intense pain, and general febrile disturbance and great prostration. On one occasion his suffering was intense, and the bladder seemed to be implicated. Every time he passed urine he experienced great pain, which caused him to cry out in agony; his bowels were constipated; the urine was of a reddish color, very hot, and acrid; he complained of dull headache, dryness of the mouth and throat, disposition to chilliness, fever, and perspiration. Twenty drops of the tincture were put in half a tumbler of water, and a dessertspoonful was taken. A mitigation of suffering was the result. The dose was repeated every hour, until it entirely subsided.

More than a year has elapsed since, and he has had no return of the malady. This gentleman having some acquaintances whom he knew to be victims of a similar disease, was prompted to furnish them with this remedy, and in some instances with like curative results.

CASE V.—A merchant, forty-five years of age, nervous temperament, inclined to be bilious, was attacked severely with renal inflammation, attended by general feverishness, chilliness, and pain in the lumbar region, and particularly in the left kidney. In this case there did not appear to be any very preceptible implication of the bladder; the quantity of urine passed was below the normal amount, and very red, and on standing awhile a brickdust sediment was precipitated. The arterial excitement was considerable; the skin hot and dry; motion very greatly aggravated the suffering of the patient, and caused him to cry out with pain; bowels were constipated.

Aconite was first given and repeated at intervals of an hour until the skin became moist, and the arterial excitement was somewhat subdued. Pain still severe; urine hot and scanty. Gave Nux vom. No relief; patient complained of soreness and pain in the lumbar region. Gave Arnica, and moved the bowels with an enema of warm water. Partial relief followed for a time; pain returned. Gave Senecio aureus. No relief for some hours from pain; urination, and every effort to urinate, attended with pain; urine tinged with blood. Gave Cantharis 3d dilution. No change. Gave Senecio two hours after in an increased dose, after which the pain gradually subsided and passed off entirely; the urinary secretion became increased to the usual quantity in health, and recovery soon followed.

CASE VI.—An attorney, aged thirty-four, of a leucophlegmatic temperament, after a prostrating attack of fever, exhibited a marked cachexia and tendency to general dropsy; urine rather scanty, with a blackish sediment, which on examination proved to be broken-down corpuscles. Senecio, in drop doses of the tincture, was given at first, and afterwards in a more attenuated form, with no satisfactory result. (Terebinth. caused a disappearance of the sediment, and Erigeron, also, in another similar attack.)

In a letter from Dr. Gray, of New York, a confirmatory statement is made of the powers of the Senecio aureus: "I have used it," says the doctor, "in renal disturbances, with satisfactory results."

For children affected with irritation of the bladder, the second or third attenuation would in all probability effect a cure. Pain in the head almost always accompanies, or immediately precedes, the symptoms of irritation of the bladder. This

remedy will relieve the headache and every other symptom connected with it. It will relieve tenesmus of the bladder. It will cure nausea, attendant on renal derangement and renal colic. It will subdue the arterial excitement that occurs simultaneously with inflammation of the kidneys, and consequently dissipate many other painful sensations.

It causes, "dull, heavy pain in the left spermatic cord, moving along the cord to the testicle; prostate gland enlarged, feels hard and swelled to the touch; lascivious dreams, with pollution."

I have found it useful in advanced stages of *gonorrhœa* and in *prostatic disorders*, in which it resembles Pulsatilla, Copaiva, Populus, and Thuja.

It is upon the generative organs of women that Senecio is reputed to exert its peculiar and specific curative influence.

In my third edition of "New Remedies" I said:

In accordance with the plan I proposed in the preface to this work, I shall proceed to give the suggestions, clinical experience, etc., of the eclectic and allopathic schools, and then that of our own school, together with my own. From the testimony thus adduced, the reader can come to some conclusion as to the value of the remedy.

It exerts no especial influence upon the female reproductive organs. In amenorrhœa, not connected with some structural lesion, it has proved very efficacious. In dysmenorrhœa it has also proved valuable. It is serviceable in amenorrhagia, administered both at the time of the discharge and during the interval.—KING.

It appears to exert a specific influence upon the uterine organs, and may with propriety be termed a uterine tonic. We have employed it in many cases of *amenorrhœa*, both in retention and suppression, and almost invariably with the most gratifying results. Indeed, so certain is it to restore the uterine secretion when suppression does not depend upon organic disease, that we almost view it as a specific. Its action is peculiar; it seems to possess the power of restoring the secretion when suppressed; of promoting it when deficient; of alleviating pain in dysmenorrhœa, and of controlling or lessening the secretion when redundant; hence one of its common names, "*female regulator*." We have long employed it to check free and too long-continued lochial discharges, after other remedies have failed, and with the most gratifying results. It has proved a valuable remedy in *leucorrhœa*, and in displacements of the uterus, attended with dragging pains in the lower part of the abdomen and pelvic region, and with leucorrhœal discharges, when combined with Trillium.—SCUDDER.

Dr. Paine coincides with the opinion held by eclectics concerning the affinity of Senecio for the uterus and ovaries. "It is," he says, "especially adapted to the defective uterine function arising from a vitiated state of the system. In scrofulous and phthisical patients I give the Senecin in doses of from one-half to one grain, combined with one or two grains of Carburet of iron, four or five times a

day. There is, perhaps, no emunctory of the body that exerts a more powerful influence over scrofulous and consumptive patients than the uterus." In these diseases Paine considers the Senecin useful, because it corrects irregularity of the menses, as to either time or quantity. "In cases of weak habit, when the catamenial period is protracted, and the blood appears to be poisoned or contaminated by the retention of zymotic catamenial poison," he gives Senecin and Hypophosphite of iron in combination. The quantity of Iron he prescribes (two grains five times a day) is, however, dangerous. Dr. Churchill, of Paris, who introduced the medicine, says it will bring on pulmonary hæmorrhage in such doses. The best allopathic authorities advise against the use of Iron in phthisis. Some homœopathic physicians have cured incipient phthisis with Ferr. hypophosphis, 3d trituration. It should not be used any lower.

Senecin has proved eminently successful in the treatment of *amenorrhœa*. When the obstruction has arisen from cold, this remedy, in connection with warm alkaline pediluvia, is generally sufficient. When the affection is uncomplicated, we know of no remedy so generally reliable. It operates kindly and without excitement, and the catamenial flow is restored in a manner so natural that the patient is scarcely aware of being under the influence of medicine. "We have derived equally happy effects from the employment of Senecin in the treatment of *dysmenorrhœa*. The most beneficial results are obtained by exhibiting it during the intermenstrual period. It acts as a special tonic upon the uterine system, invigorating the menstrual function, and restoring equilibrium of action. If the menstrual secretion be profuse, use Trillin in combination. If scanty, Macrotin or Baptisin may be employed (alternated). We have been equally successful with the Senecin in the treatment of menorrhagia. It may seem somewhat paradoxical to the reader that we should prescribe the same remedy in what are generally conceived to be opposite states of the system. No matter in which direction the scale may be turned, if we can but restore and equalize the functional activity of the parts we shall effect a cure. For this purpose we employ the Senecin simply because it possesses the power of recalling or restoring lost or healthful action. This then explains the seeming paradox of giving the same remedy in dissimilar derangements of the same organ."—Coe.

Chlorosis is another of those incidental female affections in which Senecin will be found an excellent remedy. It is particularly serviceable when chlorosis occurs in a strumous diathesis, and is associated with chronic catarrhal disorders.

Many old remedies have this regulating effect, especially *Sepia*. Pulsatilla also resembles Senecio. I think too frequent and profuse menses is a *primary* effect of Senecio; while *scanty irregular* menses is its *secondary*.

The following case, treated with Senecio gracilis, has been reported to me by one of my colleagues:

A lady, aged forty-eight, presented the following symptoms: Inability to sleep, nervous irritability, loss of appetite, coated tongue, bowels constipated, constant

feeling of lassitude, disinclined to move about, wanderiug pains in the back and shoulders; had been in this condition six months, during which time the catamenia, which, previous to this, had been regular in appearance, have not appeared; has been treated allopathically for the last three months, with no permanent benefit. I gave Macrotin, Sepia, Secale cornutum, Zincum valerianas, Pulsatilla, Cypripedium, etc., with but little or no success. At last the Senecio was given in doses of 20 drops, three times a day; this was followed by a marked improvement, and after the lapse of one week she reported herself able to sleep well all night. Under the continued use of the remedy all the symptoms disappeared in the space of two weeks longer. A relapse presenting the same phenomena, which occurred about six months later, was in like manner cured by the Senecio.

The following case is a type of many I have cured with Senecin:

A lady, the mother of one child, had had an abortion three years ago, and another, at the second month of pregnancy, four months since. Since the date of the last abortion she had suffered much from painful menstruation, which had not been the case previously. The menses came on too soon—every three weeks; were very profuse, lasting eight or nine days, and were accompanied with a great deal of pain, of a cutting character, referred to the region of the sacrum, hypogastrium, and groins. She was pale, weak, and "nervous," and had a slight cough, generally at night. Thinking this a good case in which to test the vaunted virtues of the Senecio aureus, I prescribed five doses of the mother tincture three times a day, and continued its use until the next menstrual period. To the patient's gratification and my own, the menses appeared at their proper time (in twenty-nine days), and were normal in quantity, and unaccompanied with pain or suffering of any kind.

Since reporting the above case I have treated several cases of a similar nature, and with success. In one case the first decimal dilution was used; in another, the first of Senecin; and in still another the second decimal. I have used it in many cases of amenorrhœa, where Pulsatilla failed to restore the discharge, but Senecin 2d generally had the desired effect.

It affects the respiratory organs in a manner somewhat similar to Asclepias tuberosa, Copaiva, and Pulsatilla.

In coughs, colds, and other complaints of the chest, Senecio is one of the most valuable remedies we possess. *It is especially serviceable in mucous coughs.*

It has acquired considerable reputation in chronic coughs, catarrhal affections, hæmoptysis, incipient phthisis attended with troublesome cough, *the result of obstructed menstruation*, with unequivocal advantage. I have used it in a few cases of cough

occurring in females, according to the indication given above. It seemed to act admirably. These suggestions may seem bare and valueless, unless backed up by more pathogenetic symptoms. But it must be recollected that many of our best remedies started from just such small beginnings.

The following case, reported by Dr. Thomas Irish, seems to prove that it ranks high as a remedy in pulmonary affections:

In the year 1822, in the State of New York, I was taken suddenly with profuse hæmorrhage from the left lung. Physicians were sent for; consultation took place; they manifested much wisdom in endeavoring to stay the red current of life by tapping my arm. The blood refused to flow in that direction, but the lung continued to perform its office in opposition to these endeavors to change its current by cutting the cephalic vein. All to no purpose; the life-current continued to flow until it would hardly stain a white cloth. They gave me up as lost, without hope, and then gave rules and ordered medicine taken. I refused to take medicine. I became a living skeleton; the dry hacking cough, the hectic flush and sleepless nights were my companions for day and night for about five months, and still living in opposition to the wisdom of the prophets I was in the daily habit of wandering about the fields on my father's farm, and pulling and testing of roots and herbs. The Senecio was before me, near a small stream. I tasted and was impressed to try its virtues. I had it gathered, roots and tops, and prepared a decoction, of which I took half a tablespoonful four times a day. Improvement set in soon after commencing the use of the Senecio. In six weeks the cure seemed complete. This was in the fall. I continued well through the winter; in the spring went to work; in a month was prostrated by hæmorrhage from the lung again; continued to work until fall. Again the "*life-root*" was taken, chewing the root and drinking a tea of the same. Again, contrary to the expectation of all, health was mine. In the spring of 1824 I came to Michigan; worked hard all summer; in fall was taken sick; continued feeble until spring. At every attack of the disease the lungs would sympathize, so as to have it terminate in a lung fever, with bloody expectoration. I employed no physician, but always used the "Cure-all," as I often called it. In the too free use of the green root it proved a laxative, which was not favorable to the healing process. At every attack, for eleven years or more, of lung fever, which were many, I always used the same remedy with the same success. I have never known it used in such attacks without some benefit, and the number would be hundreds.

I saw the blood spirt the size of a common straw from a cut in the leg. The Senecio, roots and tops bruised and applied immediately, stopped the blood; it was the only dressing. The person was not kept from his work an hour in all. It was a bad cut, and healed in a few days. It is the best dressing for cuts, bruises, and sores known to me. It has more power over diseases of the uterine organs than any other medicinal plant, in my opinion. In erysipelas it has with me proved a useful remedy, internally and externally.

It would seem by the last paragraph to have a general curative

influence over hæmorrhage, making it analogous upon some points with Erigeron, Trillium, and Lycopus.

An interesting case lately came under my treatment, which illustrates very well the action of this remedy upon the pulmonary tissues:

A lady, aged forty, passing through the climacteric period, applied to me for a remedy to relieve a troublesome cough. She was cured promptly by Senecio 1ˣ. Her symptoms were: Considerable debility; no appetite; flashes of heat at times during the day; redness of the cheeks in the afternoon; occasional nightsweats; menses have been very irregular for a year. It is now two months since they have appeared. Six weeks ago she caught cold, got a cough, at first dry, then loose, with copious expectoration of a yellowish, thick, sweet mucus, often streaked with blood, attended with a sensation of rawness and soreness in the chest. The paroxysms of coughing were quite severe and exhausting.

SARRACENIA PURPUREA.

This curious plant was first used as a medicine by the Indians, who, according to the reports of certain British officers, cured nearly every case of small-pox, in an epidemic of that disease which raged in Nova Scotia. So glowing were the accounts of its success in that dreadful disease, that it was used extensively in English and American hospitals, for a time, with the most varying success. It is difficult to account for the conflicting reports relative to its value in that malady, some pronouncing it absolutely inert, others asserting it to be a specific. In the first edition of "New Remedies" I published only allopathic testimony. In the second edition appeared a large amount of homœopathic testimony from English, Continental, and American physicians, nearly all of whom reported favorably of the value of the Sarracenia in the treatment of *variola*.

Some additional allopathic experience was also reported, but it was as conflicting as that previously given.

Several provings have been made by European homœopathists; one by Houatt, which is "too good to be true." The provings made by the American provers, Drs. Duncan and Thomas, do not throw much light on its applicability to small-pox, although some of the symptoms, according to Lilienthal, verify Houatt's pathogenesis.

After summing up all the testimony for and against the value of this medicine in small-pox, I am inclined to give it credit for possessing a specific power over that disease. It appears to shorten and mitigate the eruption, and prevent serious complications.

It appears to have been successful when administered in infusion (℥ss. of the root and leaves to ℥viij of hot water; a spoonful every two hours). Also in the lower dilutions, a few drops every two hours.

It is alleged to have curative effects in various *pustular eruptions* unattended by fever, such as *crusta lactea*, *prurigo*, etc. It has been recommended in *scrofulosis* and *tuberculosis*, but upon rather doubtful authority.

I have never had a good opportunity to test its value in *variola*, as I rarely treat the disease. I have given it in *varioloid*, but cannot assert that it actually modified it, because it is impossible to know what will be the extent of a varioloid.

Nor have I used it enough in other cutaneous disorders to enable me to speak favorably of it in any.

As a matter of interest I present the first notice of the plant, which appeared in 1860.

The "American Medical Times" had the following letter, by Fred. W. Morris, M.D., Physician of the Halifax Visiting Dispensary:

SIR: You have by this time, in all probability, heard something of an extraordinary discovery for the cure of small-pox, by the use of "Sarracenia purpurea," or Indian cup, a native plant of Nova Scotia. I would beg of you, however, to give full publicity to the astonishing fact, that this same humble bog-plant of Nova Scotia is the remedy for small-pox in all its forms in twelve hours after the patient has taken the medicine. It is also as curious as it is wonderful that, however alarming and numerous the eruptions, or confluent and frightful they may be, the peculiar action of the medicine is such that very seldom is a scar left to tell the story of the disease. I will not enter upon a physiological analysis now. It will be sufficient for my purpose to state that it cures the disease as no other medicine does—not by stimulating functional reagency, but by actual contact with the virus in the blood, rendering it inert and harmless; and this I gather from the fact that if either the vaccine or variolous matter be washed with the infusion of the Sarracenia, they are deprived of their contagious properties. The medicine, at the same time, is so mild to the taste that it may be mixed largely with tea or coffee, as I have done, and given to connoisseurs in these beverages to drink without their being aware of the admixture. Strange, however, to say, it is scarcely two years since science and the medical world were utterly ignorant

of this great boon of Providence; and it would be dishonorable in me not to acknowledge that had it not been for the discretion of Mr. John Thomas Lane, of Lane's Park, County Tipperary, Ireland, late of Her Majesty's Imperial Customs of Nova Scotia, to whom the Micmac Indians had given the plant, the world would not now be in possession of the secret. No medical man before me had ever put this medicine upon trial; but in 1861, when the whole Province of Nova Scotia was in a panic, and patients were dying at the rate of twelve and a half per cent., from May to August, Mr. Lane, in the month of May, placed the Sarracenia in my hands to decide upon its merits; and, after my trials then and since, I have been convinced of its astonishing efficacy. The only functional influence it seems to have is in promoting the flow of urine, which soon becomes limpid and abundant, and this is owing perhaps to the defecated poison or changed virus of the disease exclusively escaping through that channel. The Sarracenia I have reason to believe a powerful antidote for all contagious diseases, lepra, measles, varicella, plague, contagious typhus, and even syphilis, also a remedy in jaundice. I am strongly inclined to think it will one day play an important part in all these.

This remedy was believed by the Indians to be so efficacious, that if given to them when attacked with small-pox, they looked forward with confidence to a speedy and effectual cure. An old weird Indian woman was the fortunate possessor of the remedy in question. She had always been known as the doctress of her tribe, and had enjoyed celebrity for many years in consequence of her reputed knowledge of medicine and wonderful acquaintance with the herbs and roots of the woods. So well established was her fame among the Indians that when sick they resorted to her in preference to the white doctors, whom they considered to be "no good."

Captain Hardy, of the Royal Artillery, an accomplished and intelligent officer, who had been for years among the Indians, says that "the old squaw's remedy had long been known to them as an infallible cure for small-pox," and that "the Indians believed it to be successful in every case."

From the information gathered from the Indians the following observations have been carefully sifted:

1. In the case of an individual suspected to be under the influence of small-pox, but with no distinct eruption upon him, a wineglassful of an infusion of the plant Sarracenia purpurea, or pitcher-plant, is to be taken. The effect of this dose is to bring out the eruption. After a second and third dose, given at intervals of from four to six hours, the pustules subside, apparently losing their vitality. The patient feels better at the end of each dose, and in the graphic expression of the "Micmac," "knows there is a change within him at once."

2. In a subject already covered with the eruption of small-pox in the early stage, a dose or two will dissipate the pustules and subdue the febrile symptoms. The urine, from being scanty and high-colored, becomes pale and abundant, whilst from the first dose the feelings of the patient assure him that "the medi-

cine is killing the disease." Under the influence of the remedy, in three or four days the prominent symptoms of the constitutional disturbance subside, although, as a precautionary measure, the sick person is kept in camp until the ninth day. No marks of the eruption (as regards pitting, etc.) have been left in cases examined, if treated by the remedy.

With regard to the medicine acting (as is believed by the Indians) in the way of a preventive in those exposed to infection, it is curious to note that in the camps where the remedy has been used the people keep a weak infusion of the plant prepared, and take a dose occasionally during the day, so as to "keep the antidote in the blood."

We find, also, that the following result of a trial of the Sarracenia has been communicated to the "London Times" by Mr. C. G. Logie, Surgeon-Major:

Some time ago, seeing a paper written by Assistant-Surgeon Miles of the Royal Artillery on the efficacy of the North American plant, called the Sarracenia purpurea, or pitcher-plant, in the treatment of small-pox among the Indians, my colleague, Mr. Agnis, and myself have given this remedy. Four of the cases in my hospital have been severe confluent cases. They have throughout the disease all been perfectly sensible, have had excellent appetites, been free from pain, and have never felt weak. The effects of this medicine, which I have carefully watched, seemed to arrest the development of the pustules, killing, as it were, the virus from within, thereby changing the character of the disease and doing away with the cause of pitting, and thus avoiding the necessity of gutta-percha and India-rubber applications, or opening of the pustules. In my opinion, all anticipations of disfigurement from pitting may now be calmed, if this medicine is given from the commencement of the disease.

A committee of the New York Medical Society (allopathic), made a report on Sarracenia purpurea, which will be found in full, pages 7 to 19, "American Medical Times," January, 1854. They thus close their report:

Your committee has endeavored to lay before the society the history and recorded experience, thus far, in the use of the Sarracenia purpurea for the treatment of small-pox; and, in conclusion, would respectfully submit the following as their deductions from the testimony here accumulated: (1) That the analyses already made of the plant do not give any active principle or elements which would indicate any great medicinal potency. (2) That the discoverers and advocates of the specific remedial power of the Sarracenia purpurea over variola have given, apparently, too great credit to the "post hoc" circumstances as being "propter hoc" influences (one reason for this latter inference being suggested by the loose, unscientific, and eulogistic style of the communications). And (3), that the reliable experience, thus far, appears to preponderate against

the remedial efficacy of this plant in those forms of disease which do not generally recover under the administration of ordinary remedies.

From these allopathic deductions we dissent, for, although the reports have been exaggerated in many instances, the testimony, both homœopathic and allopathic, is too positive to be discarded.

In an article from the pen of Dr. Manuel Miracas, of Spain, and which appeared in "El Criterio Medico," he says:

During the epidemic of variola which prevailed for so long a time at Barcelona, and which still exists in some of the neighboring districts, I had occasion to try the Sarracenia purpurea, homœopathically prepared. This remedy, which I have used in low dilution, has invariably given me the finest results, as may be seen from the following observations, selected from the severest cases which I have treated, and given with the greatest exactness possible.

He then relates the history of seven cases of variola treated with the 1ˣ dil., and closes with the following remarks:

It seems to me that these observations suffice to demonstrate the powerful action of the Sarracenia purpurea against variola, when it is once developed. Is it possible to attribute to chance the fortunate termination of these cases, and a great number of others, still more severe, perhaps, which might be adduced? Not at all; for I have noticed, from my first experiment with the remedy, that it acts with the same efficacy and promptitude in patients differing in age, sex, and temperament. In Barcelona, as well as in Sans Saria, Gracia, Bodalona, etc., many persons owe their safety to this precious remedy, and have escaped the indelible cicatrices which variola so often leaves upon the face.

The *Sarracenia* seems to act directly upon the cutaneous system, as is indicated by the development of the pustules after the first doses and during the first forty-eight hours, the rapid desiccation of the pustules, and the absence of itching, during the period of suppuration as well as during that of desiccation.

I have had occasion to observe sometimes, in cases of patients affected with variola in the same degree, that those who had been treated allopathically, by bleeding, emetics, and other remedies which are habitually given during the two first periods, resisted the action of the *Sarracenia* more than those who had done nothing, or who had only taken some harmless decoction, as *Scabious*, or finally those who had been treated homœopathically from the outset. With the latter there was no doubt about the result; as a general thing they all recovered. Of the first class I have seen some sink under the disease before the drug could develop its action; their organism being depressed by the destructive power of the disease itself, and by the perturbating action of a senseless treatment which prevents nature from reacting against the variolous agent. However, I may say that I have saved many patients who had been previously treated allopathically. I

first modified the state of the patient by dynamized drugs presenting a similitude to the symptoms observed, and then administered the *Sarracenia purp.*

Dr. D. J. Easton says: "I have treated twenty-seven cases, out of which but two died, one a child and the other an aged man."

The "Palmer (Mass.) Journal" states that about sixty cases of small-pox and varioloid have been treated at the State Almshouse with the *Sarracenia* with but a single fatal result, and that was in the case of a man who was taken there in the last stages of the disease from a neighboring town.

Dr. Taylor, of London, has employed this remedy very extensively, and considers its utility unmistakable in arresting the progress of small-pox. The following formula was employed: Two ounces of sliced root, three pints of water, boiled in a *close* vessel down to two pints, and strained.

The first case was a little girl six years of age. She was seen on the third day of eruption of primary small-pox, and immediately began to take the decoction, four ounces per diem in divided doses, and in less than twenty-four hours the mother reported her "better ever since she began to take the medicine." The eruption was very extensive, pustules large, and in some places confluent. The case advanced apparently without interruption until the seventh day, when the pustules began to shrivel, and on the eleventh day the desiccated scales had nearly all fallen off; no pitting; patient convalescent. Every succeeding case was treated in the same manner, and with the same success. Only two patients perished; one, an infant three years old, who took it from its mother; and the other, an adult female, who seemed to sink from pyæmia on the third day of the eruption.

A poor woman brought her child, a year and a half old, to my office one night, with an eruption of small-pox, which had on that day made its first appearance. I gave her the decoction with directions to give a dessertspoonful four times a day. On the fourth and eighth days the visits were repeated, each time speaking in laudatory terms of the efficacy of the medicine. On the eleventh day of the eruption she made her last visit, making at the same time the following pertinent remarks: "I have called to thank you, sir, for your great kindness. My child is now quite well, all the scabs have fallen off, and the skin has not a blemish on it. That medicine must be very valuable, sir; for a little girl, the daughter of one of my lodgers, caught the small-pox three days before mine did, and it has not changed a bit; the pock is all over the body yet, in great mattery heads, and here is my child with her skin nearly as clean as when she was born." I was somewhat incredulous as to this perfect clearance of the skin, but in half an hour she brought the child for my inspection, and the appearance fully corroborated all she had said. She had not been vaccinated.

One man took it on the fourth day of the eruption, up to which time the dis-

ease had progressed in exactly the ordinary manner, the vesicles containing clear lymph; but here they were arrested; they never went on to suppuration, and there was no odor perceptible. Prior to his getting the infusion he complained much of restlessness and sleeplessness at night, but after he commenced taking it he slept well.

Another patient, aged twenty-five, was a man of full, plethoric habit. The symptoms were severe, and the eruption abundant, quite of the confluent form on the face; the mouth and fauces were also covered; delirium was present. The treatment by Sarracenia began on the fifth or sixth day. Relief was almost instantaneous; he slept soundly the next night without delirium, and continued rapidly to improve, and soon recovered.

Dr. Bilden (homœopathist) reports his clinical experience:

Early in the spring of 1864 the small-pox made its appearance in this vicinity. Fifty-eight cases came under my treatment, four of which were fatal. More than half were malignant-confluent. All were treated strictly homœopathically. The disease had somewhat abated when I heard for the first time in my life of the Sarracenia purpurea as a specific in small-pox. I at once ordered a package of the dried plant, and not knowing how to prepare or to use the same, I began by careful experiment. First, I filled a gallon pot full of the crude plant, on which I poured boiling water, to which it yielded its properties readily. I then put Alcohol (equal parts). When it had macerated forty-eight hours I began using the tincture. Mr. S. had two children, a boy of eight and a girl of ten years of age; confluent pustules, well filled; vaccine virus had never taken effect. Gave the boy five drops on a lump of sugar every two hours. Called several times during the day to watch the effect; could discover none; discontinued all other medicines. The next morning found that the scabbing had commenced, which was followed by a rapid convalescence. I questioned the boy from time to time, but could learn nothing satisfactory of his symptoms. The girl lingered along, as all the others had done. I began to feel a strong confidence in my unofficinal tincture; carried an ounce vial of it continually with me.

Mrs. D., a young married lady, was taken with violent headache, nausea, with pain in the loins; had been vaccinated, but did not think it had taken effect. Commenced by giving one drop of the tincture every hour, carefully watching the effect. On the second day she appeared to be much worse. I began to think the medicine was aggravating her symptoms, but thought I would continue it awhile longer. On the third day found an abatement. A burning rash made its appearance on the skin, which mostly disappeared in the course of forty-eight hours, leaving some twenty pustules on her face and neck, which soon filled and scabbed, and she was well again in a short time.

I began to use the medicine as a prophylactic. Sac. lac., one ounce; mother tincture, five drops; triturated in a Wedgwood mortar. From this I made the second trituration. Was called to see many who had the premonitory symptoms; had no more cases of small-pox, although Dr. ——, an allopathist, had quite a number of cases among his patrons for several weeks later. Should the small-pox ever make its appearance in this vicinity again, the Sarracenia pur-

purea will be my "Samson," and I shall try to learn the best method of administering it. In my opinion, it is, like Gelseminum, a homœopathic medicine in every sense of the word. What Gelseminum is in bilious fever Sarracenia purpurea is in small-pox.

The following is the adverse opinion of Dr. James Watson on the action of Sarracenia purpurea:

The cases occurred in the Edinburgh Royal Infirmary. In one of the small-pox wards, under Dr. Haldane's charge, the Sarracenia purpurea, in infusion, was administered to eight patients, the effect carefully watched in each, and the result in all was that the disease ran its natural course. The Sarracenia purpurea was found absolutely inert; it produced no effect whatever. Dr. Watson then reports one case which he especially watched, and observes: "In this case it is most certain that the Sarracenia purpurea did not in the least shrivel or wither up the eruption, nor did it seem to affect the patient in any way. It has the virtue which, happily, many—unfortunately not all—new drugs possess, of being perfectly innocuous. So much, and no more, can we say in its favor."

The following testimony adverse to the reputed virtues of the Sarracenia purpurea we select from English practice, with the desire of ascertaining, if possible, where the truth may be found:

In the autumn of 1862 an epidemic of small-pox broke out in the city of London, and Dr. Marston (then surgeon of the small-pox hospital) selected fifteen cases which were treated with the Sarracenia. Those were selected which, from the severity of their symptoms, he believed would not recover under ordinary treatment. He says: "The cases were selected on admission in the early stage of the disease, on account of the severe symptoms manifested, and because I felt it was of no use to try the efficacy of the Sarracenia on mild or vaccinated cases, which I knew very well would recover under ordinary treatment, suitable diet, etc. I cannot say that the Sarracenia had any effect whatever. It did not save life, for of the fifteen all died. It did not modify the small-pox eruptions in the least. It did not influence any of the secretions, not even to increase the urine; in only one case did it seem to act on the bowels, and this seeming effect might have been from other causes. The remedy was administered in the form of a decoction, made by simmering an ounce of the root in a pint and a half of water for four hours, until reduced to a pint, and a quarter of this given at a dose, twice a day, for two days or more. The liquor Sarracenia was also given in some cases, in drachm doses, every four or five hours. Two cases were admitted who had taken the Sarracenia decoction. The first, a mild case, had four vaccine cicatrices, which I believe highly modified the disease. The second was not vaccinated, was not severely confluent, and was wholly unmodified. They both recovered. The recovery might, perhaps, by some be attributed to the Sarracenia, but I believe it had nothing to do with it, as about half our confluent unvaccinated cases recover under ordinary treatment."

As corroborative of the clinical history I will quote to you the following paper on Sarracenia, by Dr. Cigliano, of Naples, Italy, a translation of which was published in the "American Observer," 1871, p. 467, by Professor S. Lilienthal, M.D.:

Eruptions similar to crusta lactea; on forehead and hands papular eruptions, changing to vesicular with the depression, as in small-pox, lasting from seven to eight days.

Dr. Cigliano gives *five* cases of small-pox in which the Sarracenia appeared to act very promptly, to which he adds:

From our own observations, and those of other colleagues whose communications we cannot give for want of space, we draw the following conclusions:

1. Soon after giving the remedy the temperature increases a little, but finally diminishes in direct proportion to the fever; usually in a few hours.
2. Sarracenia shows its influence at every stage of the disease. In the prodromal stage it breaks up the fever and the disease.
3. In the stage of eruption the temperature oscillates between 37° and 39°. The whole disease is over by the ninth day, without any suppurative fever.
4. The pulse always diminishes about ten beats a minute. It does not always coincide with the abatement of temperature, but will always be found in direct ratio of the individual frequency.
5. The variolous papulæ become vesicular, without becoming enlarged at their base.
6. The vesicles never pass into perfect pustules, but dry up, assuming a semispheric form, and in consequence of it the suppurative stage does not set in, and no depression will be found.
7. The contents of the vesicles are always serous, or at most sero-purulent.
8. Sarracenia not only develops a curative power, but it is also a preventive against the variolous infection, diminishing greatly the individual disposition to catching the disease without entirely extinguishing it.

STILLINGIA SYLVATICA.

Since the third edition of "New Remedies" but little clinical experience with Stillingia has been reported.

Dr. Preston's case, recorded in Vol. I, is the most striking, and verifies its power over *syphilitic periosteal rheumatism.* I have found it of great value in *chronic rheumatism.* It appears to be similar in action to Phytolacca and Iodide of potassa. In old cases, when Rhus seems indicated but does no good, I advise you

to try Stillingia in the high dilutions, changing to the lowest if no benefit arises from the use of the former in a week.

The head symptoms, also the catarrhal (nose and eyes), will strongly remind you of Kali iod., which it follows or precedes with favorable effect. The action of Stillingia is on the *periosteum*, and closely resembles Kali iod., Phytolacca, Mezereum, Mercurius, and Corydalis. It has cured *bony tumors on the head and face* (exostoses).

Dr. Simons reports the following case in which Stillingia was given alone, and effected a cure:

The patient was a little girl, who had an enlargement of the *tibia* to such a degree as to deprive her of all power of motion. Enlargements also existed in various other parts of the body, resembling nodes, upon the olecranon process, upon the head, and one in particular upon the forehead, of the size of an egg. The bones of the nose were much affected, inasmuch as to cause considerable depression. The condition of this patient was in a high degree distressing; seated in a chair, with the limbs contracted and swollen, she bid fair to pass a miserable and protracted existence, a burden to herself, and a source of anguish, distress, and trouble to her parents. Various remedies, alteratives, mercurials, had been tried by a physician long in attendance with but little benefit. I determined upon a trial of Stillingia. The infusion was employed. Recent Stillingia root, four drachms; water, one pound; simmered till one-third was dissipated. This quantity was drank during the twenty-four hours, in such doses as not to nauseate the stomach in any degree. The medicine was continued for some months, and at the expiration of several she was so much improved as to be able to move about with the aid of a stick, have the free use of her limbs, and the swellings, particularly those on the forehead, considerably reduced. The patient has every appearance at the present time of being speedily restored to a considerable degree of health.

In this case the medicine had a fair and unfettered trial, and it certainly accomplished a great amount of curative action, as no one can suppose that nature could do all that was done during the use of the remedy.

The Stillingia has not been used to any extent in homœopathic practice. Few cases have been reported in our periodicals treated with this medicine. I have used it in many cases where Mercurius, Aurum, or Thuja were indicated but did no good, and its effects seemed beneficial. No record was kept of these cases, and the particular symptoms have escaped my memory.

Dr. M. Preston reports a case of *secondary syphilis*, which had

resisted all the usual homœopathic remedies. The man suffered extreme torture from *bone pains*.

It had a wonderful and, I might almost say, an instantaneous effect. He has slept well ever since he had it. The immense *nodes* have gone from the head and legs; and from the most deplorably down-hearted (sometimes almost raving from derangement), miserable, thin-looking object, he is changed into a buoyant, joking, rotund-looking fellow.

This will compare well with Dr. Simons's case just quoted. The former used the attenuations, while the latter gave the infusion. Both preparations acted curatively.

My treatment of syphilis comprises but few remedies. I have never had any trouble in destroying the virus, and conducting the patient through the baleful *secondary* effects, and even through the *tertiary*. For the primary chancre, slight applications of Arg. nit., with dressings of dry Calomel, are all that is necessary. So soon as I am satisfied that the chancre is an *indurated* one, I proceed to combat the inevitable secondaries. This I have never failed to do successfully with the Iodides of mercury, or the Iodo-hydrargyrate of potassa.* I much prefer the latter when the disease occurs in strumous constitutions, or there is any tendency to phagedena. I do not use the ordinary preparations.

I know of no chemical agent which fully represents the preparation I use, and I have therefore always prescribed the following formula:

℞. Iodide of Potassa, ... ℥ij.
Merc. Biniod., ... gr. ij.
Aqua Gaulth., ... ℥viij.—M.
One teaspoonful four times a day, before meals and on going to bed.

I have tried the Potassa iod. and the Merc. iod. separately and alternately, but I could never get the decided curative action from those agents separately which I get combined. I sometimes substitute the Merc. cor. for the Merc. iod. in less strumous subjects.

Under the use of this formula the angina rapidly subsides, the eruptions disappear in due time, and all serious tertiary symptoms are prevented.

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* See notice of this remedy on page 485.

In fact, I am inclined to believe, with some authorities, that the so-called tertiary syphilis is, in nearly all cases, the result of mercurial poisoning.

I will here assert, without fear of contradiction, that such a thing as mercurial poisoning is *impossible* in the use of the above formula for any reasonable length of time, *i. e.*, until every vestige of the syphilitic poison has disappeared from the system.

In a few rare instances patients are, from some idiosyncrasy, intolerant of the Potassa, and as I do not like to continue any preparation of Mercury for a long time alone I resort to Phytolacca or Stillingia to promote a cure.

The reason why Mercury in combination with Potassa does not poison the system is, that the latter unites with the former in such a manner as to *carry it out of the system* before it fixes itself in any tissue, as it is apt to do when given alone or in the form of an iodide.

I do not doubt the value of Stillingia in some cases of uncomplicated and mild secondary syphilis, but I should not trust to it alone.

But for some chronic eruptions, torpid, scaly, and obstinate, it is an excellent remedy. In *congenital syphilis* it often acts better than Iod. potassa or Mercury. It goes well with Aurum, which removes the disease of the bones of the nose, while Stillingia removes the cutaneous manifestations.

Stillingia is doubtless homœopathic to some varieties of *gonorrhœa*. It has caused symptoms of *urethritis* by its primary action, and used high (12th or 30th) may prove as useful as Cantharis or Thuja.

I have prescribed it with advantage in several cases of *leucorrhœa*, which were suspiciously like the syphilitic, although they may have been gonorrhœal.

There is one other use of Stillingia which I must not pass by unnoticed. It has a specific affinity for the tissues of the larynx, especially the cartilaginous. This makes it a valuable remedy in those rare but terrible cases of *syphilitic laryngitis*. It has been used, also, in non-specific *laryngitis* and *pharyngitis*. Its laryngeal symptoms resemble those of Merc., Lachesis, and Hepar sulph. It has cured many cases of *hoarseness* and *cough* of public speakers (clergyman's sore throat). It will prove of value in *bronchitis*.

Its heart symptoms denote considerable loss of innervation in the inhibitory nerves; it may prove a valuable cardiac remedy.

STRYCHNIA.

The following paper on the use of Strychnia was read before the Wisconsin State Homœopathic Medical Society, and was listened to with great interest. I have therefore ventured to reproduce it in this work.

Strychnia is one of the alkaloids of Nux vomica. The other alkaloid, Brucia, is not used to any extent, and is not considered officinal.

Homœopathic physicians universally use Nux vomica, and very rarely use Strychnia, probably for the reason that Hahnemann gave such a thorough and extensive pathogenesis of the former and said nothing about the latter.

Strychnia bears the same relation to Nux vomica that Atropia bears to Belladonna. It seizes upon the nervous system exclusively, and has no direct effect upon the vegetative system. If we were in possession of the most exhaustive provings of Strychnia, I do not suppose we should find anything like a majority of Nux symptoms in them. We should miss the hepatic, intestinal, gastric, and many of the mental symptoms, and find only those due to irritation and spasms (primary) or paralysis (secondary) of the spinal nerves.

Before entering upon a consideration of the therapeutical application of Strychnia according to the law of *similia*, it will be proper and important to study its general physiological and toxical action on the human organization, and, to a certain degree, upon the animals.

When taken in quantities just sufficient to produce sensible *physiological* effects, Strychnia induces a feeling of restlessness, perhaps accompanied by trembling in the limbs, and some stiffness in the neck and jaws. When a somewhat larger amount has been given, there may be general muscular twitchings and startings, with stiffness and stricture of the throat and chest; formications or other abnormal sensations under the skin may or may not be present.

After *poisonous* doses the symptoms usually come on in from fifteen to twenty minutes—rarely after the hour—with great suddenness. Sometimes the convulsions are preceded by partial spasms of the muscles of the extremities, but more often the patient is thrown down by the general tetanic spasm. In this the body is bent backward, and rests upon the heels and head, in a condition of profound opisthotonos, the legs are rigidly extended and the feet everted, the arms bent and the hands clenched, the eyes staring wide open, the corners of the mouth often drawn up so as to produce the *risus sardonicus*. Sometimes previous to the attack there is a feeling of restlessness and soreness of the limbs, shooting pains like electric shocks occur in various parts of the body, often first in the back, and down the arms and legs. After the tetanic and paroxysmal contractions of the muscles set in they rapidly grow worse until the respiratory movements are arrested. In this condition the face becomes bloated and livid, the jugular veins

stand out in the neck, the eyes are staring and prominent, the jaws firmly clenched, and the pupils dilated.

Each spasmodic attack lasts from a few seconds to a minute or more, and then generally ceases altogether for a time. Throughout the paroxysm the mind is quite unaffected, and the patient's sufferings are agonizing. A breath of air, a slight noise, movement of the bedclothes, the most trivial cause, will excite tetanic spasms. Sometimes, however, a firm grasp or hard rubbing of the muscles is grateful. All the senses are sharpened to an intense degree, and even the mental operations are more vivid.

In a fatal case death is rapid, and if the patient survives two or three hours hope of his recovery may be entertained.

If the case terminates favorably, the convulsions gradually lessen in intensity and fade away.

Death occurs from asphyxia, or spasms of the muscles of the chest, or from exhaustion from repeated convulsions.

I have given you a brief but clear picture of the extreme *primary* action of Strychnia. A series of provings would show a multitude of symptoms affecting the nervous system directly, and showing perversion of the various functions of the organs largely supplied with motor and sensory nerves, and causing a large variety of pains and abnormal sensations.

The question now arises: Are there no *secondary* effects of Strychnia?

This is a very important question, for upon its solution rests the truth of the homœopathic law; for, *if Strychnia does not cause motor paralysis, we cannot prescribe it in such cases without violating that law, i. e., without using it antipathically.* Let us carefully examine the records of cases of Strychnia poisoning, and see if we cannot find proof of secondary action.

We find that during the *intervals* between the spasms, "*the jaw drops, the muscles relax, insensibility obtains, and fæces and urine are passed involuntarily.*" These are the first indications of its secondary paralyzing effects. We also find that after recovery from poisoning by Strychnia, the senses are apt to be *obtuse* for some time. The muscles are sore, and respond feebly to the will. Motion is slow and difficult. The eyes are dim, there is ringing in the ears, the mind is sluggish, speech is thick and difficult, taste and smell are altered, and all the symptoms of nervous exhaustion show themselves unmistakably.

Strychnia is no exception to the rule I have often mentioned in my writings, namely, that a *massive* dose will often develop *secondary* effects not preceded by the primary.

Immense doses of Strychnia have often caused insensibility, with loss of sight and hearing, followed by sudden death in the first attack of spasms. This was due to its sudden, overwhelming secondary action.

Moreover, the investigations of Matteachi, Kolliker, and others have proved that "*after death from Strychnia the functions of the motor nerves are always found to be more or less destroyed,* so that galvanization of the nerve trunk either produces only very feeble contractions in the tributary muscles, or else none at all." Wood considers it proven that the functional power of the motor nerves is destroyed in Strychnia poisoning, but he asks: "Is this destruction a *direct action of the poison,* or is it simply the exhaustion of over use, due to the intense activity of the nerve

during the stage of spasm?" Kolliker thinks the latter is the sole cause of the nerve paralysis, but Vulpian and other observers controvert his theory by experiments which prove that "enormous doses of Strychnia kill the frog *without the induction of spasms*, by general paralysis with total loss of power in the nerve trunks." Evidently, in such case, the *paralyzing* action of the poison on the nerves must be direct.

There is another peculiarity of *secondary* Strychnia action which is of great diagnostic importance, namely: It paralyzes the *efferent* but not the *afferent* nerves. This it appears to do before it paralyzes the spinal nerve-centres. In other words, the peripheral portions of efferent nerves die before their roots, or before the nerve-centres from which they spring are completely exhausted. Wood's assertion, that "the general collapse (paralysis) of frogs from Strychnia poisoning is *largely* due to the affection of motor trunks and not to exhaustion of the spinal cord," is only partly true. Its ultimate secondary action is spinal exhaustion, and is as much a Strychnia effect as its ultimate primary excitation and congestion.

Harley's experiments show that Strychnia acts on all parts of the spinal cord. "Its effect on this organ," he says, "appears to be twofold. It dilates the vessels, and thus increasing the supply of blood augments the activity of the functions of the cord." But apart from this property of dilating the vessels, it is supposed that Strychnia exerts a direct stimulating influence on the spinal cord, although, as Harley has shown, it can act only through the blood, and does not, as was formerly supposed, exalt the functions of the cord when divested of all its vessels, and when a solution of Strychnia is brought into direct contact with its elements.

The experiments of Spence *seem* to prove just the opposite of this; for when he supposed he had drained all the blood from the body of a frog, and placed a piece of Nux vomica upon the exposed brain, convulsions occurred from above downward, as fast as the poison permeated the substance of the cord.

Strychnia differs from many other poisons in this,—that it *is only in increasing the reflex faculty of the spinal cord* that it causes convulsions. This vital property of the cord reaches such a very high degree that any external or internal excitation brings on a reflex tetanic contraction, the violence of which, according to a well-known law, is in proportion to the degree of the reflex faculty. So long as the spinal cord does not receive some kind of excitation, however powerfully poisoned by Strychnia it may be, there is no convulsion.

In other words, the cord may be ever so much congested, but the abnormal reflex irritability is not shown, unless it is excited by the touch, or some other form of irritation.

There are many other drugs which cause spinal congestion, but none which cause this peculiar abnormal condition in the tissue of the cord. If Strychnia causes this twofold condition of the spinal cord by its *primary* action, it causes, as the results of poisoning in animals show, a secondary action just the opposite, namely, *an anæmia of the cord, with paralysis, from exhaustion, of the faculty of the reflex motor nerve-cells.* Not only this, but it causes a paresis of the trophic (nutrient) nerve-cells, and as Hanfield Jones believes, may cause paresis of the cerebral nerve-centres.

Therapeutically considered, the action of Nux vomica and Strychnia differ

only in degree. Nux will cause all the symptoms of Strychnia, but Strychnia will not cause all the effects of Nux. As I stated in treating of Atropia, an alkaloid is but *one* constituent of a drug, and only represents a part of its power.

But *in its sphere* an alkaloid is often better than the drug from which it is isolated, because its action is more direct and intense.

The therapeutics of Strychnia, without being absolutely *confined* to disorders of the nervous system, is certainly best manifested in that system.

The question which meets us at the onset is a momentous one, namely: What are the diseases and symptoms for which Strychnia is *primarily* indicated?

Among the most prominent I must name *tetanus*. As Baehr says: "If there is any truth in the homœopathic law, Nux vomica ought to cure tetanus." So I assert in relation to Strychnia. Baehr says he cannot find any record in homœopathic literature of cases of tetanus treated with Nux vomica, nor have I been more successful in my researches.

Our literature is particularly barren of cases of tetanus. Baehr, in commenting on this fact, suggests that homœopathists rarely treat the disease.

One would suppose that the treatment of tetanic spasms with Nux would be published with considerable flourish of trumpets, as a brilliant illustration of the truth of the homœopathic law.

On examination of our works on practice, I find that Nux is recommended *theoretically*, but no cases illustrative of its efficacy are reported. Marcy and Hunt recommend Nux, Belladonna, Arnica, Stramonium, Cicuta, Hyoscyamus, Pulsatilla, and Sulphur.

Of these none have the slightest positive value except Arnica, and perhaps Cicuta; and the recommendation of Pulsatilla and Sulphur is absurd.

The same authors mention the following as having cured individual cases: "Tobacco, Nicotin, Aconite, Atropia, Belladonna, Conium, Henbane, Cannabis indica, Opium, Camphor, etc." But these are all *secondarily* homœopathic to tetanus, or, according to some, antipathic.

Now, until we can cure true tetanus and trismus with Strychnia, we should be careful about boasting of the universality of the law of *similia*.

The value of Strychnia in tetanus, singularly enough, received its confirmation, not from the homœopathic, but from the allopathic school.

In Stillé's "Materia Medica," I find that Strychnia has been used successfully in tetanus. Stillé says:

"The diseases characterized by *excessive*, or *rather*, *disordered action*, in which Strychnia has been employed with benefit, are more numerous than those which have been noticed. Even in *tetanus* its power has been unequivocally displayed. In 1847, Dr. Fell, of New York, published seven cases of tetanus, six of which were of the traumatic variety, and all recovered under its use. His plan of administering it was to give one-eighth or one-tenth of a grain, and in two hours one-sixteenth of a grain, then reducing the dose still further, and only to the extent of producing specific signs of its influence after each one. Dr. Kalloch, also, relates a case of traumatic tetanus, occurring in a negro girl, which was cured by Strychnia, given in doses of one-twelfth of a grain every two hours."

Hammond, in his work on "Diseases of the Nervous System," does not allude to these cases. We can hardly account for this omission on the part of such a

thorough investigator, except on the theory that he doubted their trustworthiness. It cannot be possible that he omitted them for fear of giving testimony that would prove the truth of the fundamental law of homœopathy.

I cannot believe that in these cases the condition of the spinal cord was the same or *similar* to that caused by Strychnia. Hammond says nothing about any difference in the pathological appearance in the cord, occurring in traumatic and Strychnia tetanus. But there must be a difference, and in that difference we must look for the reason of the cures by Strychnia in doses of one-tenth or one-sixteenth of a grain. Dr. Fell admits that each dose *caused aggravations*, and those who are familiar with the action of homœopathically indicated medicines know that quite appreciable doses will *cure primary symptoms*, but in so doing they always cause aggravations. My belief is that traumatic tetanus, while it presents many of the outward symptoms of Strychnia tetanus, does not arise from the same pathological conditions in the cord. A careful study of the different diagnosis of the symptoms forces one to this conclusion. The fact that the dose used by Dr. Fell *did not kill*, is also proof of the same conclusion. It is absolutely certain that if the identical condition existed in Dr. Fell's cases which obtain in Strychnia tetanus, a dose of one-thousandth of a grain would have caused terrible if not fatal aggravations.

I should not dare to prescribe Strychnia under the 6th centesimal attenuation in true tetanus, if I believed there was intense congestion of the cord, together with the peculiar excitation of the reflex motor nerve-cells so characteristic of Strychnia tetanus.

Idiopathic tetanus has its origin *in* the cord or its membranes. Traumatic tetanus commences at the periphery of the body. Now it is difficult to imagine that tetanus of a central origin is the same as tetanus of a peripheral origin. *No record has been found of the treatment of idiopathic tetanus by Strychnia*, and the treatment of Strychnia tetanus by Strychnia is out of the question. This narrows the use of appreciable doses of Strychnia in tetanus to the traumatic variety (possibly the hysterical).

I have frequently prescribed the 6^{c} of Strychnia in the tetanic spasms of cerebro-spinal meningitis (which is an idiopathic tetanus) with the best results, and I should have equal confidence in the higher attenuations.

In *chorea*, when the convulsive motions are due to perverted action of the motor portion of the spinal cord, and when the convulsions *do not cease during sleep*, Strychnia is *primarily* indicated, and should not be prescribed lower than the 12th or 30th attenuations.

If the chorea is due to disease of the heart, to rheumatism, or from mental emotion, or from cerebral irritation, it corresponds to the secondary action of Strychnia, and that remedy may be given in the doses used by Trousseau and Hammond. The former gives one-twenty-fifth of a grain, one or two doses a day; the latter gives one-fiftieth of a grain three times a day. Trousseau considers it necessary to cause slight stiffness of the jaws and neck, and some jerking in the limbs. Hammond does not think it necessary to cause such symptoms. It is not only unnecessary, but criminal to give a drug to the extent of causing toxic symptoms, especially such a poison as Strychnia.

Under no circumstances is it necessary to give Strychnia lower than the 3^{c} trit. in the treatment of functional chorea.

The primary Strychnia constipation is due to spasmodic contraction of the circular fibres of the intestines. Strychnia 30th will promptly cure this variety after Nux vomica has been used unavailingly.

Acute myelitis and *spinal meningitis*, although not usually caused by Strychnia, may come under its primary curative power.

It causes intense congestion of the cord and its meninges, which, if persistent, results in inflammation and softening. As an intercurrent remedy it will be of value in alternation with Veratrum viride or Belladonna, even in the acute stage.

In the later stages it alternates well with Cannabis indica or Ergot, but I would not advise it to be given lower than the 6th or 12th centesimal.

The same may be said of *paralysis* when caused by any organic disease of the cord or brain, such as effusion (sanguineous), congestion, softening, etc. Allopathic authorities are particular to caution their readers never to give Strychnia in paralysis from *actual lesions of the cord and brain* until *after all signs of irritation have disappeared*, or *unless the paralysis is of reflex origin*. This is a very proper caution from the allopathic standpoint. But the homœopathist is not confined to such narrow limits.

Strychnia is primarily homœopathic to paralysis, from the causes enumerated by Brown-Séquard, as *contraindicating Strychnia*, namely, myelitis, meningitis, pressure on the cord, hæmorrhage in the spinal cord, congestion of the cord, softening of the cord. In all of these conditions Brown-Séquard says Strychnia *ought to be avoided*, because it increases the flow of blood to the cord and aggravates the paralysis. It is evident that it did not occur to Brown-Séquard to give the Strychnia in minute doses; the dread of, or utter disbelief in, the value of attenuated doses, prevents such men from attaining all scientific truth.

I have treated many cases of paralysis from the conditions above mentioned, and have seen the best results from Strychnia 6th cent. The presence of congestion or extravasation is an excellent indication for the use of Strychnia in the highest attenuations. I prefer the Phosphate of strychnia in these cases.

Strychnia is *secondarily* indicated in all cases of paralysis (paraplegia) from *exhaustion of the spinal cord*, *spinal anæmia*, *reflex paraplegia* or *hemiplegia*, or *white softening;* also in cases where it was primarily indicated, but after all signs of irritation have passed away, leaving a paresis of the motor nerve-centres.

Allopathists are very successful with Strychnia in such conditions—if they are correct in their diagnosis—for it is only in such cases that they can use large (appreciable) doses with safety.

Brown-Séquard, in his admirable work on "Paralysis of the Lower Extremities," gives the differential diagnosis of the two grand divisions of paralysis—the *reflex* and *direct*—and I advise every homœopathic physician to procure and consult that work in order to enable him to attain a certainty in diagnosis, such as he cannot otherwise attain.

The doses of Strychnia most applicable in cases of reflex paralysis, or cases of a secondary nature, depend on the age of the patient and the duration and intensity of the disease.

Careful physicians, like Hammond, Brown-Séquard, and Trousseau, who have

made the subject of paralysis a life-study, advise Strychnia to be given in quantities just sufficient to cause *slight drawings and jerkings in the affected parts.*

As this effect of Strychnia is always *first* manifested in the paralyzed limb, the danger is not as great as might be supposed. In fact, there is no danger at all if this effect is watched for and the dose decreased as soon as observed.

This method of using Strychnia is sanctioned by the most practical men of all schools. You will rarely be able to cure paralysis with this remedy unless you follow these rules.

The dose for an adult will range from the one-fiftieth to the one-twentieth of a grain, repeated three times a day, until its action on the paralyzed portion is observed, when it should be decreased gradually.

For a child under twelve years, one-fiftieth to one two-hundredth of a grain may safely be prescribed.

The homœopathic preparations of tincture and trituration afford us a ready method of prescribing the dose with sufficient precision.

Many physicians and surgeons prefer to administer the Strychnia by *hypodermic injection*, as its action is more certain when introduced into the system in this manner. The quantity *injected* must be much less than when taken by the mouth (one-tenth as much in most cases).

Amaurosis, when it is of a paralytic nature, is frequently cured by small doses of Strychnia. It should only be used when the disorder is caused by *atony of the retina* from some cause acting directly upon its texture through the medium of general debility, or when caused by using the eyes by very feeble light. An aqueous solution of one grain to one ounce of water, a few drops placed in the eye, and the region of the eye bathed with the same, is the best method of application in such cases.

Diplopia with amaurosis has been cured by the same method. *Night-blindness* has been promptly cured in the same manner.

Griffin cured a case of *congestive amaurosis* by means of one-twelfth grain once or twice a day for eight weeks. It must have been a *passive* congestion, or the Strychnia would have made it worse.

In homœopathic treatises on diseases of the eye, Nux vomica is recommended for the above conditions, but I am satisfied that the alkaloid will act more promptly, especially when secondarily indicated.

Facial neuralgia and *neuralgic headache* will often refuse to be benefited by the ordinary doses of Nux in use by our school, but will promptly disappear under the use of the 3^{x} of Strychnia sulph. In one very obstinate case the Valerianate of strychnia cured after other preparations failed.

Mathieu relates a singular case of *spasm of the œsophagus* in an hysterical woman, who was afflicted to such a degree that she was rapidly becoming emaciated and exhausted. Strychnia was resorted to, "and as soon as it developed its specific effect, the œsophageal spasm ceased altogether." The dose is not mentioned. Homœopathists have cured similar cases with Ignatia and Cocculus.

Among the secondary affections which Strychnia cures may be named *prolapsus recti*. It has cured cases of years' standing. Nux and Ignatia have a great reputation in this trouble, but in very old cases they fail. Then the Strychnia is

of great value, for it can be injected into the cellular tissue near the anus (one one-thousandth of a grain), and a brilliant cure often ensues from a single application. In other cases small injections, each containing the same quantity of the drug, are very successful.

Incontinence of urine or *retention of urine*, when both conditions depend on *impaired power* in the muscular coat of the bladder, from habitual distension or pressure of the uterus, is often cured promptly by a few doses of the 3ˣ, or even the 6ˣ.

Sexual impotence is treated very successfully by our school with Nux vomica; but there are cases, especially when the condition is purely from *spinal exhaustion*, in which Strychnia is more useful.

Usually the impotency cured by Strychnia is attended by more or less paralysis of the lower extremities; but cases are on record where the paralysis appeared to be confined to the penis alone. In the latter instance Strychnia does not perform a *cure*, it only removes the disability *for the time*. This power, however, even if limited, may be of great importance, as in cases where the possession of an heir is necessary to the perpetuation of a family or the retention of an entailed estate.

If I should be called upon to mention any particular class of disorders in which the Strychnia was most important, I should name those dependent on *perverted or excessive reflex action*. We have seen how it exalted to an abnormal condition the functions of the reflex motor nerve-cells, and I have mentioned its value in reflex paralysis. There are many serious and troublesome reflex disorders which are more successfully treated by Strychnia than by any other remedy, but these disorders are primary, and the medicine must, therefore, be used in the smallest doses. Of these affections I will mention particularly *headache*, *prosopalgia*, *cardialgia*, *vomiting*, *dyspepsia*, *cough*, etc.

No other drug so uniformly causes *hyperæsthesia* of the reflex faculty by its primary action. Consequently no drug is so homœopathic (primarily) to reflex neuroses. To be successful in the treatment of these affections with Strychnia, all the modalities and concomitants of its action must be studied, and it must be prescribed in the most attenuated doses. Then we shall make very brilliant cures.

Bromide of potassa is just the opposite of Strychnia in this respect. It is secondarily indicated. But it will make as brilliant cures in the same reflex affections if given in appreciable doses.

In some of the *cardiac neuroses*, which depend on paresis of the motor nerves, you will find Strychnia a potent remedy. These neuroses are either spinal, direct, or reflex. In either case there is always a constitutional debility, attended with poor circulation, feeble cardiac action, and a quick, small, and feeble pulse. The slightest emotion, physical exercise, or derangement of digestion causes oppressed action of the heart, with great nervousness and prostration. It acts in these cases in a manner apparently similar to Digitalis. I say *apparently*, because both increase cardiac power, but the Digitalis acts from the *centre*, *i. e.*, *on the cardiac ganglia*, while Strychnia acts *through the cord*. In special cases they can be alternated with excellent results.

Some cases of *asthma* are said to have been cured by Strychnia. I imagine

the asthmatic symptoms were probably due to a kind of paralysis of the muscles concerned in respiration, more than to any affection of the lungs.

In addition to these special indications for the use of Strychnia, there are some general indications which you should fix in your memory.

(1.) Strychnia is *primarily* indicated whenever the reflex nervous system is in an excessively irritable condition; when all the senses are in a state of *hyperæsthesia;* and when the mental sphere partakes of the same abnormal sensitiveness. In this condition the 30th attenuation will be found to be most appropriate.

[Hahnemann gives the same indications for Nux (also for China and Phosphorus). This condition may occur in chronic as well as acute diseases, and Strychnia will be found to be better than Nux in cases specially involving the reflex nervous system.]

(2.) Strychnia is *secondarily* indicated in *spinal exhaustion*, when the reflex nervous system, the cerebro-spinal nerve-centres, and even the trophic nerves are in a condition of *paresis.*

[In this condition the whole organism or a portion of it may be paralyzed, or in a state of paresis in which the functional activity is far below its normal condition. There may be present cerebral paresis, with resulting *dementia, idiocy, melancholy,* and even softening of the brain; or spinal paresis, with *paraplegia, hemiplegia, chorea, cardiac weaknesses, dyspeptic states, constipation, chronic diarrhœa* (often involuntary), *enuresis, impotence,* etc. When the *nutrient* nerves are affected there is *marasmus* from deficiency of assimilation. The nerves may lack nutrition, and then will occur the various forms of *neuralgiæ, spasmodic disorders,* such as *epileptiform fits, catalepsy, masked ague,* and many other neuroses kept up from force of habit, a condition always present in spinal paresis. In these conditions and disorders the lower attenuations are required, and *sometimes* appreciable doses, even as low as the one-tenth of a grain.]

A few words as to the antidotes of acute Strychnia poisoning. If the patient is seen immediately make him drink large quantities of melted lard, Olive oil, or milk. These seem to prevent absorption.

As special antidotes, Tobacco, Nicotin, Opium, Morphia, Curare, Wourali, Chloroform, Camphor, Aconite, and Chloral have all been recommended. Of these all but Chloral are very objectionable on account of their depressing effect on the heart and other organs. Chloral is the least objectionable, but I would not give that alone. It is more efficient when combined with the Bromides. Doses of 30 to 50 grains of Chloral, with the same quantity of Bromide of soda or Potassa, repeated every three or four hours, has saved many desperate cases.

The Bromides are, on the whole, the safest and most efficacious antidotes. Of the Potassium, or Sodium salt, two or four drachms, in severe cases, can be given every twenty minutes for an hour; after which smaller doses should be frequently administered.

In cases where persistent trismus exists it may have to be administered by injection. Generally, however, there are intermissions between the paroxysms sufficient to allow of a dose being swallowed (℥j of water will dissolve ℥j of the Bromide of soda, or Potassa).

If the Passiflora should prove upon full investigation to possess the virtues claimed for it by Dr. Phares, it will be an excellent antidote to Strychnia.

Nitrate of amyl may be found to be an antidote in some cases, but it should be used cautiously.

Of course all these antidotes to toxic doses act by antagonizing the specific poisonous effect of Strychnia on the spinal cord. They *paralyze* the nerve-centres which are irritated by that poison. This paralysis must be kept up until the danger is over.

Of the various preparations of Strychnia the *Sulphate* is generally used. It is probably the most certain of all.

I often use the *Phosphate* when the cerebral functions are involved, or when the symptoms seem to call for Phosphoric acid or Phosphorus.

The *Citrate of iron and Strychnia* is a favorite preparation with many of our school. It is perhaps the best in all cases where *anæmia* is a predominant symptom. The use of this double salt obviates the alternation of Strychnia with Iron. I usually prescribe it in the 1ˣ trituration.

In many cases of exhaustion of brain power, or in women in whom a high state of nervous erethism exists, I have seen brilliant curative results attend the use of the *Valerianate of Strychnia*, in the 2ˣ trituration or dilution.

STICTA.

This lichen has attained great popularity in severe *catarrhal affections*.

It was first used for severe, harassing cough, and such good results accrued that provings were made to ascertain its full value. It was found to cause severe *coryza* with *violent sneezing, intense headache*, and *conjunctivitis*. These attacks were preceded or followed by *rheumatic pains and swellings of the small joints*.

Thus you see it gives a fair picture of the worst forms of the catarrhal malady.

It is almost specific for "*hay fever*," and those distressing attacks of *influenza* which are epidemic in the winter and spring. At first nothing but hot, irritating, watery mucus is discharged; afterwards it becomes thick, bloody, green or yellow. These discharges sometimes dry up, the mucous surfaces are like dry leather, scabs form in the nose and throat, and cause painful hawking and cough. In this stage, owing to the suppression of the discharge, rheumatic inflammation of the joints occurs.

Ozæna in its worst forms may be benefited by Sticta, although it may have to be followed by Aurum, Kali bich., or Mercurius iodatus.

It greatly relieves the *cough of phthisis, laryngitis, bronchitis.* The cough is "racking," "incessant and wearing," lasting hours, and causing great exhaustion.

It is said to have cured *whooping-cough, croupy-cough,* and *catarrhal asthma.*

Dr. Lilienthal reports "*sick headache*" cured with it.

Miss A. M., eighteen years of age, delicate from childhood up. . . . . She menstruated for the first time when thirteen years old, and since then she has suffered continually from sick headache. When these dreadful attacks come on, she has to lie down; light and noise aggravating it; perfectly impossible to swallow anything; nausea and vomiting, nearly to faintness. These paroxysms commonly last several days, and leave great debility in their train. She never was a good eater, as her stomach seems deranged, but enjoys, otherwise, pretty fair health. No cough whatever, although she looks like a phthisical patient. Allopathy and homœopathy have, until now, tried in vain to alleviate these attacks. Being on a visit to an aunt here in the city, she had one of her *migraines.* Sticta being a great favorite in that family, the young lady was prevailed on to try the new remedy, and for a wonder she appeared that evening at dinner free from headache and enjoying the meal. She took a bottle of Sticta home with her, and we hope her joyful anticipation of eradicating her troubles with it may be verified.

It has some singular nervous symptoms, like those of Ambergris, and Dr. Burdick, of New York, says he has cured *hysteria* by its use.

It is one of those remedies that you will find indispensable during the months of February, March, and April, in this climate.

I usually prescribe the 1ˣ dil., and the general testimony appears to be that the lowest dilution, or the tincture, is the most efficacious.

The cases of *rheumatism* cured by Sticta are of sufficient interest to warrant me in quoting a few of them:

CASE I.—Male; aged forty-five. During the latter part of last winter and the forepart of spring, suffered severely with rheumatism in the right shoulder-joint, deltoid and triceps muscles, extending at times to the forearm, commencing to pain me in the night. Towards morning, my arm becoming nearly helpless; could not put on my coat without help; during the day lameness nearly disappearing; this condition lasting nearly two months; no heat or swelling. Cimicifuga racemosa, Phytolacca decandra, and Colchicum were used in succession in small and larger doses, with but temporary relief. I now resolved to try Sticta, first dilution, four

drops, four or five times per day. Improvement commenced at once. Discontinued medicine in a few days; difficulty permanently removed.

CASE II.—Edward P., aged forty-eight; rheumatism in the right ankle-joint; swollen and very painful; could only get around with the help of a cane; had applied domestic treatment for several days; without benefit. Gave him a drachm vial of Sticta 1st, dose four drops four times a day; cured in four days. Says he used no other medicine.

CASE III.—Mrs. C., aged forty-one; taken very suddenly with pain, reaching through the chest from sternum to spinal column; constant, worse on movement; the arms powerless, from extreme pain, if an attempt was made to move them. Gave Sticta 1st, three drops, five times a day. The first dose gave relief; well in three days. Together with the above symptoms, there was difficult breathing and speaking for some time. Treatment commenced about twelve hours after attack. In these cases no other medicine was used to my knowledge.

CASE IV.—Mr. F., aged fifty years, came to me, saying he had rheumatism all over him, and could get no relief; said he had tried everything, had been to two or three allopathic physicians, but was getting worse every day. His troubles commenced about six months ago, with sharp, darting, lancinating pain, first in the knee-joints, then in the elbow and shoulder. The finger-joints were next involved, and it gradually extended to every joint in the body; the pain in the neck and head was intense. At the present time the joints are all swollen and stiff. He cannot sleep for the pain, and can scarcely walk. By comparing the above with the provings of *Sticta pulmonaria*, I found a perfect type of the disease before me in this drug, and I at once determined to test its curative power. The following are the results: I gave Sticta 1st, five drops to a tumbler of water, a tablespoonful to be taken every hour. August 23d. Mr. F. reports himself greatly improved; pains not so severe; has *slept* better. Sticta 1st, as before. August 26th. Reports a great deal better; can walk better than at any time during the past five months; pain in the head and neck gone; all the pains are less severe, and the joints are not so much swollen. Continued Sticta 1st, as before. August 28th. Reports himself entirely well; has no pain; swelling all gone; says he feels better than at any time during the past nine months; stiffness of the joints all gone; he is getting young again, and walks as sprightly as a young man.

CASE V.—Mrs. G., aged about forty; rheumatism of the wrist-joints. She had been under treatment for nearly three months, with very little if any improvement. The wrists and hands with but little redness; very painful on moving them. I had given her nearly all the remedies that are usually given in rheumatic troubles; none of them had afforded relief to any extent. After the results procured in the last case by Sticta, I determined to try it in the case of Mrs. G. I accordingly gave her five drops, 1st, in a tumbler of water, a teaspoonful every two hours. On the day after I called, and on entering the room she exclaimed: "Doctor, you have done it this time!" To my great surprise I found her sewing. The pain and swelling were nearly gone. Sticta 1st was continued for a few days, and the cure was permanent.

SEMPERVIVUM TECTORUM.

The House-leek is a very old domestic remedy, used for nearly the same purposes as the Plantain (Plantago). It is applied to *painful ulcers, boils, felons,* and the like.

Several notable cases of *ulcers in the mouth,* suspiciously like cancer, have been reported cured by the local application and internal use; also an ugly ulcer on the shoulder.

It is recommended for burns, erysipelas, warts, corns, and ringworms.

The thick, succulent leaves are full of a cool, mucilaginous juice, that would be grateful to an irritable, painful surface, and palliative if not curative.

SILPHIUM.

This common plant of our prairies contains a large quantity of balsamic and resinous juice. Physically and medicinally it resembles such remedies as Copaiva, Turpentine, and Cubebs. It also resembles Stannum and Sambucus.

It has been found useful in *catarrhal asthma, chronic bronchitis,* and catarrhs of the respiratory organs generally.

Some of our physicians value it very highly in *catarrh of the bladder.*

I have used it quite successfully in a few cases of asthma, that reminded me of the "*heaves*" in horses—(horses are often cured of heaves by eating the leaves).

It is considered curative in gonorrhœa and gleet. All the mucous surfaces of the body seem to come under its influence. The high dilutions are adapted to the *acute* stages; the lower to the *chronic.*

Dr. George A. Hall, of Chicago, once published the following fragmentary proving, and clinical cases, in the "Investigator:"

About ten years since my attention was first called to the above remedy in the treatment of "mucous asthma," "bronchitis," "catarrh," and other diseases involving mucous surfaces.

Proving.—I have attempted several provings with *Silphium,* which have been unfortunately interrupted, but succeeded in eliciting the following primary symptoms:

(The 1st dec. trit. was given in doses of two grains, gradually increased to ten grains every two hours.) It produces a scraping, tickling, and irritation of the fauces and throat; nausea, sick, faint feeling, and a sense of *goneness* in epigastrium; a desire to hawk and scrape the throat, throwing off a thin, viscid mucus. Irritation extends up posterior nares, involving mucous membrane of nasal passage, producing sneezing, followed by a discharge of limpid, acrid mucus from the nose, attended with a constriction and pressure in the supraorbital region.

Engorgement and thickening of mucous membrane of the throat, extending down as far as could be seen; a rough cough, attended with expectoration of yellow mucus.

A constriction and tightness of lungs, with a constant disposition to raise; hacking, spasmodic cough.

Tongue covered with a whitish slimy coat, attended with a dry sensation, as if burned with hot soup. Urine high-colored and scant; frequent passages, accompanied with a sense of heat or burning at the meatus urinarius during passage of urine. Stools natural in form, but covered with white slimy mucus.

An internal, feverish sensation, but pulse not accelerated. Want of appetite.

Clinical Observations.—For ten years I have used *Silphium* in asthma with large quantities of stringy mucus, in influenza, coryza, catarrh, and believe it to be the best remedy we have in phthisis when gray or yellow mucus is *expectorated copiously*, causing rapid exhaustion.

I used the 2d dec. trit., in one or two grain doses every two hours, until expectoration is diminished perceptibly, and then at intervals of four or six hours, until expectoration is diminished to a degree consistent with other symptoms of the case.

CASE.—I will report one case, in which I first employed *Silphium* with the happiest result. Mr. H——, aged fifty-five years. Had phthisis of twenty years' standing. For several years he had been under the care of L. M. Kenyon, one of the closest prescribers in Western New York.

Upon the slightest exposure or cold the patient would suffer with congestion of mucous surfaces, followed with copious expectoration of stringy, frothy, light-colored mucus, which would exhaust him rapidly, sometimes confining him to his bed for weeks in spite of the best-selected remedies, expectorating from one to three pints of mucus in twenty-four hours. After the patient came under my care, Dr. Kenyon sent me a dec. trit. of *Silphium*, with a request that I should try it in his case. It was not long before I had an opportunity of doing so, for he was taken with one of his usual attacks with unusual severity. On this occasion I prescribed, in the morning, *Silphium*, the 2d dec. trit., two gr. powders, every two hours, until expectoration diminished perceptibly.

The following morning I found my patient laboring under great apprehension as to the result of the remedy he had taken. On inquiry I learned he had only taken three powders, when cough and expectoration diminished so rapidly as to excite alarm, and he discontinued their use.

During the night he raised less than a teacupful, compared with a pint and a half the night before. There was no increase of fever, no soreness of lungs, or difficulty of breathing more than usual, but an increased desire for food. The fears of my patient vanished when I assured him he was decidedly better, and

the remedy had excelled my expectations. Many times since, during the past ten years, I have used *Silphium* in the same case, under similar circumstances, with equally pleasing results.

I seldom give the tincture, as its curative effect has never been as satisfactory as the trituration, and I seldom give it above the 3d. I have used it in dysentery, when attacks have been preceded by constipated stools covered with white mucus. I believe it to be one of the chief remedies in the treatment of the "epizootic," and in the catarrhal influenza now so prevalent in this city.

SOLANUM NIGRUM.

In my "Symptomatology of New Remedies" I have given a full pathogenesis of this valuable medicine. My attention was first called to it by the statement of several country practitioners that they had been using for years an indigenous Belladonna, and with better results than they ever got from the foreign. I found, on investigation, that, misled by the name "Nightshade," they had been using the Solanum. I then studied all the authorities attainable concerning the effects of this remedy. Dr. Hering aided me materially. I was surprised at the richness of its pathogenesis. The symptoms are clear-cut and characteristic. Many of them bear a remarkable resemblance to Belladonna. (It may be possible that Hahnemann got some Solanum symptoms mixed with those of Belladonna.)

In *meningitis* (cerebral and cerebro-spinal) I value it very highly.

In *headache* it gives me and my patients better satisfaction than Belladonna.

In *angina* it often acts admirably. *Amaurosis* and *ophthalmia* are under its powerful curative influence.

It is valuable in *spasms*, especially the *convulsions* of teething children, or those who suffer from severe intestinal irritation. *Puerperal convulsions* may be warded off by its timely use.

In *scarlet fever* you will find it will often give you prompter curative results than Belladonna, especially when the eruption is not smooth and diffuse, but in *spots*, large, red, and livid.

I think it will prove very useful in *chorea, insanity, typhoid fever*, and many serious disorders of the nervous system.

I advise you to study the pathogenesis carefully, and carry the remedy side by side with Belladonna. I have generally used the

2[x] dilution, but it has been used successfully by German physicians in the 30th.

SULPHATE OF NICKEL.

This preparation of Nickel was first used by Dr. J. Y. Simpson in *periodical headaches* of a peculiarly severe character.

You will find in Vol. I several cases recorded illustrating its curative power.

Nickel very much resembles Arsenic in all its qualities, toxic and therapeutic. It also appears to have qualities analogous to Zincum, Quinia, and the Bromides.

It has gained some popularity in the treatment of *neuralgia*. You will doubtless find it valuable in some of those obstinate *periodical neuralgias*, even when due to malarial poisoning, which have resisted the ordinary remedies.

I have generally got the best effects from the 2[x] triturations. Allopathists make good cures with one-half grain doses, three times a day. The 2[x] trituration can be given every hour or two during the paroxysms, and three times a day during the intermissions.

Like all antiperiodics its curative value is best tested by giving it *between* the attacks.

SUMBUL.

This medicine is prepared from a singular root found growing in Central Asia. It has an odor so similar to musk that it is largely used in the adulteration of that expensive perfume. We here have one of those strange similarities between the animal and vegetable which baffles the curiosity of investigators. Are the ultimate atoms of the perfume of Sumbul and Moschus identical? Are the dynamic effects of those atoms the same? Is their curative power similar? These and many more questions arise and confront us when we contemplate the strange similarity of their perfume.

Old Professor Tully asserts that their *odor* as well as taste gives us a clue to the curative power of drugs. I believe it is partly

true. The odor of Aralia and Eryngium are very similar, and both are useful in asthmatic affections.

Sumbul is useful in many disorders for which Moschus is recommended. Both have symptoms strikingly similar, and their action on the nervous system is quite analogous. Sumbul also resembles in effects many other odoriferous substances, namely, Castoreum, Nux moschata, Ambergris, and Asafœtida.

The pathogenesis of Sumbul shows it to be homœopathic to *hysteria* and those mental aberrations peculiar to nervous women. *Vertigo* is a prominent symptom. It ought to cure *acne* in young persons. It causes a peculiar, persistent, *nasal*, and *pharyngeal catarrh*, which closely resembles the Sambucus catarrh. I believe it will prove one of our best remedies for those catarrhal affections of children, attended with great nervousness, *sleeplessness*, and *tendency to spasms*. The discharge consists of *tenacious yellow mucus*, like that of Hydrastis and Cubebs.

When collecting its symptoms I was impressed with the idea that it would prove a good remedy in verminous affections, particularly the reflex nervous symptoms. I afterwards found the record of several cases of "*ascarides*, with bloated, drumlike abdomen and constipation, picking at nostrils, etc.," cured by the 15th dilution.

Sumbul causes that peculiar appearance of the urine due to the presence of Urate of soda, namely, *an oily pellicle* (scum) *on the surface* (Sulphur, Pulsatilla, Petroleum).

Its *primary* effect upon the generative organs of both sexes appears to be that of a powerful excitant. It causes an inflammation of the male organs similar to the effects of the *gonorrhœal poison*. It may prove a useful remedy in *spermatorrhœa*.

Its sphere of action doubtless includes the uterus and ovaries, but the provers were nearly all men, and the only clinical record we have is a reported cure of *pains in the left uterine region*, which may have been in the left ovary.

It is said to be one of the constituents of a popular nostrum used for *asthma*. One homœopathic physician, a Dr. Weaver, praises it in that disease.

If useful in asthma, it is indicated in the *catarrhal*, but more especially in the *spasmodic* (hysterical), perhaps also the *cardiac*.

The cardiac symptoms are so unique and characteristic that I have carefully arranged them in the pathogenesis in systematic order. I believe it will be found a superior remedy for many *functional disorders* of the heart which are not amenable to ordinary medicines. I doubt its power to cause or cure structural lesions,—although the prover got "murmurs, bellows' sounds, and purrings,"—but, as Dr. Cattell observes, they may have been due to "muscular contractions." I think I have observed in many cases "murmurs" and various abnormal sounds, which were caused by irregular contractions of muscular fibres of the heart.

I expect to use it successfully in *nervous palpitation*, occurring in hysterical patients, or at the change of life. It is homœopathic to the *flushings* of that period. It seems to affect the *left side* in preference to the right. The *venous* system is more under its control than the arterial. (Its action on the heart may be mostly on the venous side.)

Dr. Cattell, the original prover, found it useful in *typhoid fever*, as an intercurrent remedy; in *prurigo* in an infant; also in *epilepsy*, *fainting*, *dropsy*, and *chorea*.

Sumbul is a drug of which we probably as yet only very partially know the value. In Russia it is used in low fevers of a typhoid type; also in asthenic cases of dysentery and diarrhœa; and it has even been said to have proved successful in cholera. It is considered by Thielmann, of St. Petersburg, the most trustworthy remedy in delirium tremens. Dr. Granville, who introduced it into England, recommends it in cases of gastric spasm, hysteria, dysmenorrhœa, epilepsy, and nervous disorders. Mr. Murawieff, a Russian physician, recommends it in chronic bronchitis, moist asthma, occurring in old anæmic and scorbutic subjects, in atonic dyspepsia, leucorrhœa, hypochondriasis, and hysteria. I can bear witness to its decided efficacy in chronic bronchitis, and in certain stages of phthisis.

As a remedy for *neuralgia* of a certain type, Sumbul has probably more value than any known drug. It is sometimes very surprising to observe the rapidity with which a severe facial, sciatic, or *ovarian neuralgia* will yield to a few doses of Sumbul, though it had resisted very powerful remedies. It is difficult to say exactly what are the characteristics of the neuralgias which

prove thus amenable to Sumbul, but certainly this kind of pain is most frequently found in women, particularly those of a quick and lively nervous constitution. On the other hand, the dull migraine of hysterical women, who have a phlegmatic constitution and a great tendency to obstinate constipation, does not yield readily, if at all, to Sumbul.

A prominent Russian physician recommends Sumbul very highly for a peculiar form of *neuralgia*, which attacks the *left* hypochondriac region, or the region under the left breast, and is so severe as to simulate *angina pectoris*. It occurs in nervous, lymphatic women who are suffering from uterine disorder, and is often attended with *palpitation* of the heart. In such cases a few drops of the tincture often act magically. In this respect Sumbul resembles Cimicifuga, Pulsatilla, and Lilium.

In the restlessness of pregnancy, an affection which is exceedingly distressing to some women, though others do not suffer from it, Sumbul is often invaluable; a draught of thirty to forty minims of the tincture, with a little Chloric ether, giving quiet nights for a long time together without losing its power.—Phillips's "Materia Medica."

In the insomnia of chronic alcoholism Sumbul often serves a similar purpose very efficiently.

TANACETUM.

Although Tansy is one of the oldest of medicines in domestic practice, and a plant possessing powerful toxic properties, there has never been any systematic proving of it until very lately. In Vol. I is given a pathogenesis arranged by Dr. —— ———, and compiled from various provings and cases of poisoning. The symptoms were obtained from the tincture of the plant and from the oil.

Cases of poisoning from the use of the oil for the criminal purpose of causing abortion, have often been reported to medical journals, but the special symptoms and conditions of such cases have not been as carefully observed as they should have been.

It is a violent poison,—an acro-narcotic,—and has produced *clonic* and *tonic spasms*, *coma*, *delirium*, and *death*.

It resembles, on the one hand, Sabina, Turpentine, Hedeoma, and Ruta; on the other Stramonium, Cimicifuga, Cicuta, and Cuprum.

Its sphere of action includes the brain, spinal cord, kidneys, bladder, uterus, and ovaries.

It will be found most useful in diseases of women arising from disorder of the generative organs, and presenting severe reflex spasmodic or cerebral symptoms.

Theoretically I would recommend it in *threatened abortion, premature labor, morning vomiting, puerperal spasms* (from disease of the kidneys), *metrorrhagia*, etc.

It has been found curative in *amenorrhœa, dysmenorrhœa, menorrhagia, uterine cramps*, and *metritis*, especially when spasmodic symptoms threaten. The indications for its use in the last-named disorders nearly resemble Sabina.

Scanty menses is a secondary effect of the drug. I have relieved several cases, when, with the scanty flow, headache and stupor were present. The dose required was a few drops of the 2^{x} of the oil.

It may prove useful for *dysuria, nephritis*, and perhaps the *uræmia* of pregnancy.

In cases of poisoning by Tanacetum the heart grows weaker, the pulse more irregular, until death.

Its action on the heart is probably through the cord. It may prove useful in some *reflex cardiac disorders*.

A crystallizable acid has been extracted from Tansy, which is identical with Santonin. This explains why it has always had such a reputation in domestic practice for the removal of *worms*, and the alleviation of *worm symptoms*.

It is homœopathic to *spasms* from the irritation of worms and uterine disorders, and possibly *reflex paralysis*, which sometimes occurs from the same causes.

It is said to have cured *St. Vitus's dance*, with symptoms like Stramonium.

It may in time prove a useful remedy in many nervous disorders.

TARANTULA.

The singular accounts of the effects of the bite of this spider are so mixed up with superstition and exaggeration, that it is almost impossible to extricate the true from the false.

I make no doubt that the bite of all the venomous spiders causes, sometimes, very singular nervous phenomena. I have

myself witnessed some strange aberrations of the mental and nervous spheres from the venom of the field spiders of this climate. In the tropics all venoms are more intense. The Tarantula is accounted the most poisonous of all, and in sensitive organizations may cause some very extraordinary manifestations.

The most striking phenomena of Tarantula-poisoning are the *choreic disorders*, more severe and terrible than are caused by any other poison. It is said to have cured the worst cases of St. Vitus's dance.

It is alleged to have cured some *spasmodic hysterical symptoms* in women, arising from uterine irritation.

It appears to affect the motor side of the cord in a manner different from any other known remedy, unless we except the Mygale.

THERIDION.

This is another spider-poison. It seems to have a sphere of action differing from that of Tarantula. Drs. Hering, Neidhard, and Barlow have reported some cures made with it, but it is rarely used by the majority of physicians.

It appears to have cured *headache, vertigo, neuralgia of the face and eyes.* The headaches resemble those of Belladonna, Sepia, and Spigelia. It is homœopathic to the headaches so common to many women, which always begin with "flickering before the eyes." It also cures that symptom when unconnected with headache.

Its action on the stomach seems not to be direct, but reflex. It cures a *vomiting when closing the eyes*, and when it resembles that of sea-sickness. Its gastric symptoms resemble those of Cocculus. It is reported to have been used successfully in *hepatitis, hysteria, climacteric affections*, and some *cardiac disorders.* It is even said to cure *incipient phthisis, scrofula, rachitis, caries*, and *necrosis.*

Mr. Tafel informed me that Dr. Barlow, of New York, cures a peculiar severe pain in the side with Theridion, which resists all other remedies.

It has been used, generally, like Tarantula, in the highest potencies.

THAPSIUM AUREUM.

This remedy, once called *Zizea aurea*, belongs to a class of poisons among which are Cicuta, Æthusa, and Œnanthe.

It has not been much used, except by Dr. Marcy, the original prover, who reported a few cases of *migraine*, a kind of sick headache, with acid and bitter vomiting. He recommended it in *influenza, neuralgia of the face and eyes, ovarian neuralgia, leucorrhœa, cough*, and *epilepsy*.

I have never used the medicine, nor have I seen other clinical reports than those I have mentioned.

THLAPSI.

The Shepherd's-purse seems to possess specific powers over *hæmorrhages*. When first introduced into notice it was highly praised and quite extensively prescribed; but of late I have heard but little about it. I once used it in a case of frequent and profuse menses, but got no decided results.

In the hands of other physicians it seems to have been found of value in *epistaxis, hæmaturia, menorrhagia, delaying menses, frequent and profuse menses, uterine cramps, hæmorrhage* from cancer uteri, or miscarriage.

It appears to resemble Trillium, Hamamelis, and Crocus in its action on the bloodvessels.

The best effects have been gained from the lowest dilutions and tincture.

THYMOL.

The following account of the chemistry of this new disinfectant I copy from a paper by Professor A. B. Prescott, of the University of Michigan.

Among the new chemicals of the last twelve or fifteen years, no therapeutic agents have taken a more prominent place than certain antiseptics, few in number, but each quickly adopted in general practice and even in non-professional use. First came Carbolic acid, well-established in time for the "Pharmacopœia" of 1870. Then, in 1875, Salicylic acid was admitted to a permanent place as a rival and companion to the former article, from which it was manufactured. Meantime, the use of Sulphites, Hyposulphites, and Sulphurous acid has received a fresh impetus, and antiseptic treatment in surgery and in medicine has been a matter of constant attention. And now, beginning about a year ago, Thymol is another article of general interest in medicine and pharmacy, and is already officially proposed for the United States Phamacopœia of 1880.

In 1875 the writer mentioned the noticeable fact that Thymol is the one member of the Carbolic acid family—the monatomic phenols—known to exist

ready-formed in plants,* but this was with no thought of its use as an antiseptic. Its value had been suggested by Bouillon, a French pharmacien; but the experiments which brought the article into continued public notice were made, it is claimed, in Professor Liebreich's laboratory, in Berlin, in May, 1875, and noted, shortly afterward, with numerous additional testimonies, all over the world.† Early last year, Dr. Crocker, of London University College Hospital, gave a favorable report, generally copied.

The results in Liebreich's laboratory claimed for Thymol, in arresting the fermentation of sugar and the decomposition of albumen and milk, a power ten times greater than that of Salicylic acid. Others claim only four times greater preservative power for Thymol than for Carbolic acid. But the distinctive advantage of Thymol over Carbolic acid is due to its being far less corrosive in concentrated form, and much less irritant in the dilute mixtures suitable for its use. Being volatile, like Carbolic acid, it is more penetrating than Salicylic acid. It is an antiseptic, not itself a septic, at least in external use. Also, it is of an agreeable odor.

Its administration, internally, has not received much attention. Applied to animals subcutaneously, it acts as a poison.—HUSEMANN.

Thymol is a crystalline solid, nearly colorless, with a pleasant aromatic odor, and a burning aromatic taste, melting at about 44° C. (110° F.), and boiling at about 230° C., with specific gravity of 1.028. It dissolves freely in Alcohol, Ether, Chloroform, Benzol, Chloral hydrate, in water solutions, and in Oils and Vaseline, but is very slightly soluble in water and Glycerin. The caustic Alkalies, in water, dissolve it freely, but without chemical union. Four grains in an ounce of Alcohol can be diluted with water to any extent without turbidity. It is soluble in ten parts of milk.—SYMES.

A good solution is that of one part of Thymol, 10 of Alcohol, 20 of Glycerin, and Water to 1000 parts. Dr. Crocker uses a lotion of Thymol five grains; Alcohol and Glycerin, each one fluid ounce; and Water to make eight fluid ounces. Likewise, an alkaline solution, five to eighty grains Thymol, with solution of Potassa enough to dissolve it, and Water to eight fluid ounces. As an ointment, five to thirty grains of Thymol may be mixed with one ounce of Vaseline. Gauze dressings, in antiseptic surgery, are saturated with a mixture of 16 of Thymol, 50 of Resin, and 500 of Spermaceti. Thymol and Camphor, in proportions from two of the former with one of the latter, to one of the former with ten of the latter, form a colorless liquid. This liquid is miscible with Chloral hydrate.—SYMES.

For carious teeth, and other uses of dental surgery, Thymol has decided advantages over Carbolic acid in its agreeable odor.

In price Thymol now costs ten to fifteen times as much as Carbolic acid, but in view of its greater potency, it is but little more expensive.

Chemically, Thymol is one of the phenols, the group to which the Carbolic acid bodies belong. Phenol proper (pure crystallized Carbolic acid) is a six-carbon

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* The Aromatic Group in the Chemistry of Plants. London Phar. Jour. (3), vii, 164.

† Jahrbücher b. gesammt. Med., Bd. 168 (1875), 81; Am. Jour. Phar., xlvii (1875), 346; Phar. Jour. (London), (3), viii, 45, 706.

Phenol; Cresol, the chief constituent of the "Cresylic acid" of commerce, and more potent than crystallized Carbolic acid, is a seven-carbon Phenol; Xylenol, an eight-carbon Phenol, and Thymol a ten-carbon Phenol. In structure, Thymol is Prophyl-methyl-phenol. These bodies are not acids. The common term Carbolic acid is accepted by the Pharmacopœia, and its alkali solutions are often termed Carbolates, but it may be hoped that the name of Thymic acid will not gain adoption. The alkaline solutions of Thymol are mixtures, not chemical compounds.

Carvacrol, a product of Carraway oil, and sometimes used in dental surgery, is isomeric with Thymol.

Thymol, by contact with Sulphuric acid, forms Thymol-sulphuric acid, exactly analogous to Phenyl-sulphuric acid, the acid of the well-known Sulpho-carbolates in medicinal use. Whether the Thymol-sulphates have any claims in medicine or not remains to be ascertained. The metallic Thymol-sulphates all dissolve in water.

Thymol forms about one-half of Oil of thyme, from *Thymus vulgaris*. The Oil of origanum of commerce is really Oil of thyme, and as true Origanum oil has no advantage over Oil of thyme, the former name has been dropped from the Pharmacopœia. Thymol is also found in the Horsemint, or *Monarda punctata*, and in an East Indian aromatic fruit, *Ptychotis ajowan*, or "Ajava seeds." The Thymol of commerce is at present obtained from Ajava fruit. Thymol can be separated from the other constituents of Oil of thyme (chiefly Cymene, a hydrocarbon) by dissolving in a Potassa solution (five per cent.), separating the undissolved oil, and adding to the solution enough acid to neutralize, when the Thymol precipitates. The hydrocarbon of Thyme oil, Cymene, is a ten-carbon compound, closely allied to Thymols, and likewise found in the Oil of cummin. Thymol is stated to be one of the constituents of *Terebene*, an aromatic liquid obtained by the action of Sulphuric acid upon Turpentine oil, and used as an antiseptic and promoter of Ozone.

Dr. Ch. Adams, Professor of Surgery in the Chicago Homœopathic College, writes of its use in a paper entitled the Antiseptic Treatment of Wounds.

Thymol or Thymic acid, a derivation of the *Thymus vulgaris*, has been recently reported on by Ranke (for Volkmann, of Halle). It is preferred by him to the Carbolic acid for its lack of irritant qualities, its easy use and less expense. A decided advantage possessed by the Thymol is that a solution of uniform strength (1–1000) is used for lotion,* sponges, instruments, and spray. As the agent is perfectly unirritating the protective is dispensed with—the wound being dressed with Thymol gauze,† as in the Carbolic treatment. From the clinic of

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* *Thymol solution.*—Thymol, 1 part; Alcohol, 10 parts; Glycerin, 20 parts; Water, 1000 parts.

† *Thymol gauze.*—Prepared by saturating gauze, by weight, 1000 parts with Thymol, 16 parts; Resin, 50 parts; Spermaceti, 500 parts.

Volkmann, Ranke reports fifty-nine cases of operation in which Thymol was used, formation of pus taking place in only two. As far as my own experience with it has gone the results have been perfectly satisfactory, the only objection to it being its odor, which to patients with sensitive olfactories is occasionally annoying.

I have used the spray in the treatment of chronic catarrh of the nose and air-passages. In many cases it acts better than Carbolic acid.

Internally, Thymol has not been used to any extent. Dr. Volkmann, of Halle, has given it in the *diarrhœa* of children, five drops of a one per cent. solution. I have found it useful in the *offensive stools of children, due to fermentation of the contents of the stomach and intestines, and attended by large quantities of offensive flatus and colic.* It ought to be useful in *tympanites,* especially when occurring in typhoid.

TRILLIUM.

This important remedy has not been subjected to physiological experimentation by our school. I believe it will prove a valuable agent when its pathogenetic properties are fully understood.

Our limited knowledge of its curative powers will not enable us to correctly define its sphere of action or fix upon its analogues.

It seems to me to have a near affinity for Hamamelis and Sanguinaria. I have given other analogues in Vol. I, but not with such precision as I should like.

Like all anti-hæmorrhagics it doubtless possesses some influence over the vasomotor system of nerves. It may be primarily homœopathic to vasomotor spasm, and secondarily to vasomotor paresis. In large doses it checks nearly all hæmorrhages. In small doses it checks passive hæmorrhages. In attenuated doses it cures the results of suppressed discharges of blood (perhaps of mucus).

I will quote some testimony from physicians of other schools, that you may see how they estimate it. Professor Lee says:

From all I have observed, and can gather from others, I am led to believe that the Trillium is one of our most valuable tonics, astringents, alteratives, and especially beneficial in most cases of passive, atonic hæmorrhages, as menorrhagia,

etc. Less astringent than many other plants, it is far more alterative and tonic, yet it has decided efficacy as an astringent, when this indication is present. The late Dr. Williams used the powdered root in all kinds of active hæmorrhages in doses of one drachm to an adult, repeated according to the urgency of the symptoms. Dr. Stone, of Massachusetts, has made very extensive use of it in all forms of bleeding, especially from the womb and lungs, and, as he thinks, with great and decided benefit. In the various forms of scrofula and cutaneous diseases he has also seen great advantage from its use. In popular practice the Birth root is used in parturition, and is believed to facilitate the birth of the child, hence its name. Dr. Lee found it employed extensively for this purpose among the Chippewa Indians, on Lake Superior. They also believed it to be a certain specific for the bite of a rattlesnake. It seemed to be their favorite remedy in all female complaints, especially those attended with discharges; indeed, the evidence in its favor, in cases of vaginal and uterine leucorrhœa, is very strong and satisfactory; also in passive bronchorrhœa and hæmoptysis.

Dr. Coe ("Concentrated Organic Medicine") says:

Its dynamic influences are chiefly directed toward the mucous surfaces, over which it seems to exercise a special control. Though mostly employed in affections of the uterine system, it is, nevertheless, of great utility in the treatment of all diseases involving the mucous membranes. It is decidedly antiseptic, and is useful in correcting a tendency to putrescency of the fluids, and the fetor of critical discharges. Slight hæmorrhages occurring from wounds, cancerous ulcerations, etc., may be corrected by its local application.

The *hæmorrhages* for which it is generally used are *epistaxis*, in which it appears to be very effectual; *melæna*, or discharges from the bowels of dark, grumous blood; *dysentery*, after all inflammation has been subdued and dark blood is discharged.

It does not seem to have been used in *hæmaturia*, but it has been given successfully in *diabetes*. Drs. Jones and King both assert its value in the latter disease, but do not say which kind it cured.

It is supposed that the Tannin found in the root of Trillium accounts for its value in hæmorrhage, but Geranium contains much more, and has no such properties.

Its greatest popularity has been gained in the treatment of *hæmorrhages from the uterus*. From allopathic and eclectic authorities we get the following testimony.

Dr. E. G. Wheeler reports the following cases illustrative of its effects in flooding, menorrhagia, and leucorrhœa.

CASE I.—Mrs. G., at the third month of pregnancy, was taken at 6 o'clock

A.M. with a bloody discharge from the uterus, with pain in the back, considerable sickness at the stomach, and occasional chills. I was called in at 9 o'clock; the flooding had greatly increased during the last hour, and the patient fainted as I went into the room. The pains had ceased; os uteri dilated to the size of a twenty-five cent piece, but rather tense; loss of blood very great. I made a strong infusion of the Trillium root and gave her two tablespoonfuls every ten minutes; in half an hour the bleeding had greatly diminished; the infusion was continued, but given at longer intervals, and in two hours from the time I was called in the hæmorrhage had ceased altogether; pains returned during the following night, and the fœtus was expelled with but very trifling loss of blood.

CASE II.—Was called at 4 o'clock P.M. to see Mrs. S., at the full term of pregnancy; os uteri dilated to the size of half a dollar; no pains; flooding excessive. Administered the Trillium as in the preceding case; it acted promptly, so that in an hour from the time of giving the dose the bleeding had entirely ceased. In about four hours labor-pains came on, and she was shortly delivered of wo healthy children, with no more than the usual amount of hæmorrhage.

CASE III.—Mrs. M., at about the third month of pregnancy, had had slight uterine hæmorrhage for two or three days previous. At 8 o'clock in the evening of the third day she became alarmed by sudden and excessive flooding. I was immediately called in, but her fainting turns were so frequent and so protracted that I could not give the remedy as fast as I desired; and, notwithstanding I brought all the means to my aid that I could command, I greatly feared I should lose my patient. In about three hours, however, she had taken an infusion made with about three drachms of the bruised root, as nearly as I could judge, and the hæmorrhage was perfectly controlled. Thirty-six hours after these pains came on, and the fœtus was expelled without any further trouble. It may not be amiss to state that I think I have found this remedy of decided utility in facilitating labor. I have treated cases of leucorrhœa satisfactorily. The plant I made use of is the *Trillium atropurpureum*.

It is decreed by some writers that the Trillium is most useful in *passive* hæmorrhages, but the cases above reported were of an opposite character. We have no proving of this remedy showing its pathogenetic action upon the generative organs of women, nor can we decide with any certainty as to the pathological states which it would induce in the uterine tissue. To say it acts by giving tone to the uterus would not convey any exact idea, although it actually has that effect; it stimulates the uterine nerves to healthy action, and as a consequence we have muscular tonicity, and a healthy condition of the mucous membranes. Hæmorrhages from the uterus either arise from relaxation or laceration of the bloodvessels of that organ, or from abrasion or relaxation of its mucous coats. Any drug, therefore, whose symptoms correspond, will possess the power of causing just such pathological

changes, and will, therefore, cure similar lesions. The analogues of Trillium are Terebinthina, Sabina, Pulsatilla, and Erigeron canadensis.

Dr. Chamberlain, of New Hampshire, recommends the "Trillium in cases of uterine hæmorrhage, and profuse flooding after confinement." He prescribes half a teaspoonful of the powdered root in molasses, repeated every ten or fifteen minutes. Dr. Freeland has used it for thirty years, with success, in the same conditions.

The following clinical cases occurred in my own practice:

CASE I.—*Menorrhagia.*—Mrs. M., aged twenty-eight, had been subject for several years to frequent and profuse menstruation. The menses came on every fourteen days, and lasted seven or eight. In the intervening periods there was puforse leucorrhœa, of a yellowish color and creamy consistence. The blood was once bright red, and but lately, owing to her anæmic condition, has been pale and mixed with a leucorrhœal discharge. She took Crocus, Platina, and Sabina, but with no apparent benefit. Trillium 2d dec. was then given, in doses of one grain, four times a day. The first effect noticed was a diminution of the leucorrhœa, then the menses delayed one week. The medicine was continued, and the next menstrual period came on at the end of four weeks, and was not followed by leucorrhœa. She was then put upon the use of Ferrum met. 1st dec., and Helonin 1st dec., one grain of the former after taking meals, and a similar dose of the latter before eating; and in a few weeks her strength and color returned. Several other similar cases were treated with the same medicine, and all recovered.

CASE II.—*Metrorrhagia.*—Mrs. S., aged forty-six, passing through her climacteric, had occasional attacks of a profuse flooding, at irregular times, so profuse as to bring her down very low; the blood was thick, dark, and clotted, and would continue several days. The attacks had been partially controlled by the use of Sabina and Crocus, but being called during the first day of a seizure, I determined to test the Trillium. Ten drops of the 1st dec. dilution were given every half hour; in a few hours the flooding had decidedly diminished, and subsided completely in two days. This was continued, in alternation with Sanguinaria 3d, and she had no more attacks, but menstruation ceased normally.

CASE III.—Mrs. T., aged fifty, had been subject to attacks similar to the above, but was anæmic, dropsical, and much debilitated. Apis 2d relieved the dropsy promptly; Helonin gave her more strength and better digestion than she had had for months; and when her attack of flooding came on, Trillium 2d decimal arrested it in two days. These attacks were of a peculiar character; the discharge was pale, watery, only slightly tinged with blood, but very profuse, accompanied with prostration, vertigo, dimness of sight, palpitation of the heart, and a painful sense of "sinking at the pit of the stomach." All these symptoms, which usually lasted eight or ten days under allopathic treatment with Sulphuric acid and Mur. tinc. iron, subsided in two days under the action of minute doses of

Trillium. In this case the discharge was *really* blood, as much as if it had been red; but such was her anæmia that the red globules were very deficient. She had become jaundiced, but under the use of Leptandra 2d decimal, the liver resumed its normal functions, and her increased appetite and digestion soon brought some color to her pallid cheeks.

CASE IV.—*Hæmorrhage after Abortion.*—The fœtus and placenta came away properly, but imprudence kept up the hæmorrhage, which was dark, sanious, and accompanied with pain in the back, dragging in the loins, and soreness in the hypogastric region. All these symptoms subsided after using Trillium 2d decimal for a few days.

The late Dr. J. C. Peterson reports his experience with this drug in *uterine hæmorrhage:*

CASE I.—Mrs. C., abortion in the fourth month, with retention of the placenta. I was called in haste about midnight, and found her flooding excessively; extremities cold, face pale and anxious; the os dilated, and the body of the uterus firmly contracted, so much so that it was impossible to remove the placenta by force. Gave Trillium pendulum, two drops every fifteen minutes. She responded at once to the action of this remedy. The next day the removal of the placenta was attempted by means of the placenta forceps, but after an hour's trial I was forced to abandon the attempt. It ultimately became disorganized, and passed on the sixth day. She had several attacks of flooding during this time, but the Trillium succeeded in arresting it at once. China, Secale, and Pulsatilla were given for other conditions. The patient fully recovered.

CASE II.—Miss A., aged forty-eight. Menorrhagia at change of life. Was called to visit her in haste, and found her almost exsanguious. She had been flowing freely for some ten days, and for the last few hours the hæmorrhage had been active. She presented all the physical symptoms of excessive hæmorrhage. Gave Trillium pendulum tincture, three drops every fifteen minutes, which within an hour had completely controlled the flooding. Secale corn. 3d followed the Trillium. The patient has since that time (November, 1864) been well.

CASE III.—Mrs. B. Post-partum hæmorrhage. Was confined with her third child. Her labors with the previous children had been attended with almost fatal hæmorrhage. Immediately following the birth of the third child she was seized as in her former confinements. Gave Trillium pendulum, a drop every five minutes, which arrested the flooding immediately.

In short, without citing other cases, I will say that I know of no remedy in the Materia Medica that so certainly controls active uterine hæmorrhage. It excels Sabina, Secale, and Hamamelis.

TRIFOLIUM PRATENSIS.

The common red clover of the fields has long had some reputation as a remedy for *cancer*. A paste or solid extract is made from the blossoms, and this is applied to the ulcer constantly.

You will often hear of wonderful cures made by means of this simple preparation, but you will find it difficult to trace the reports back to a reliable source,—at least I have not been able to do so. I do not believe it possesses any more curative action in such cases than any simple poultice.

In relation to its efficacy in *whooping-cough* there seems to be a greater amount of positive proof, and some indications of its homœopathicity.

It is well known that the inhalation of the odor or impalpable dust arising from the dried blossoms, will cause in some persons a severe spasmodic cough and asthma, and in horses it causes that disorder known as "heaves." ("Heaves" may be either an emphysema, a chronic laryngitis, or a simple asthmatic affection.) It certainly causes horses to cough violently. It is supposed by some that this cough is due to mechanical irritation from spores, or dust, from the dried flowers. Certain it is that *musty* clover is more likely to cause cough and asthma. In fact, many farmers and horsemen deny that properly dried clover ever causes these troubles in horses.

In the provings of Duncan and others, however, the tincture caused a severe cough, somewhat spasmodic.

Eclectic writers assert that it "exerts a specific influence in some cases of *whooping-cough* and in the *cough of measles*, also in the spasmodic coughs of laryngitis, bronchitis, and phthisis." They use a tincture of the recently dried blossoms.

We have but little recorded experience of its use in these disorders, but it seems worthy a trial after Ipecac or Drosera fail. The

TRIFOLIUM REPENS,

Or small white clover, has been recommended by Dr. J. S. Douglas for *salivation*. It causes profuse ptyalism in horses, and probably would in men, if they would chew enough of the fresh blossoms to excite it. Its secondary effect would probably be undue dryness, or suppressed saliva. Dr. Douglas thinks he saw benefit from it in a case of suppressed salivation ("druling") in a teething infant. It may prove useful in such cases, especially where a diarrhœa follows the suppression.

TRIOSTEUM.

This remedy, commonly called *Fever-root*, has not been used as much as it appears to deserve. It has been partially proven by Drs. Williamson, Neidhard, Tallmadge, and Gatchell. Many of its symptoms resemble Aconite and Mercurius. Dr. Tallmadge, an eminent homœopathic physician of Brooklyn, New York, informs me that he finds it of great value in *typhoid* as well as *gastric fevers*. He says he was informed by Dr. Matthews, of Rochester, that the Triosteum had proved, in his practice, to be one of his most reliable remedies in gastric affections, with or without fever. It is one of the ingredients of a *fever-powder* largely used by the eclectics. I advise its use in *bilious headache* with gastric irritation, also "sick headache." It has cured *bilious colic*, *dyspepsia*, *diarrhœa*, and *dysentery*. It appears to be indicated in *rheumatism* and *urticaria*.

TURNERA APHRODISIACA.

No provings have yet been made with this new medicine. It will have to be born "breech foremost," as Dr. Hering says. I therefore print some of the most reliable clinical experience concerning its use. My own experience leads me to believe that it is an analogue of Cubebs, Kava-kava, Copaiva, and Sumbul.

Damiana is the Indian name of this new drug recently introduced, and is the leaf and stem of a small plant that grows near the western coast of Mexico. Its botanical name is given above. It is a small plant, with a white fragrant flower, is collected for medical use in August, at which time the stems are covered with a fragrant gum.

This drug was first heralded to the profession in too much of a cure-all and quacky style. We, with many others, had come to look upon the article as decidedly "gamy," and a source of profitable revenue to the charlatan. In many cases in which it has been employed, we believe it has proven a failure. This might have been owing to an erroneous selection of cases, the prescriber having been misled by the glowing announcement of its wonderful capabilities as an aphrodisiac. As the drug is one of our mints, in style of taste being decidedly

like Buchu in its flavor, it is probably stimulant in its action to the urinary channels, through which it passes to be eliminated. If the incorrigibles (due to some nervous lesion) had not been among its first cases for experimentation, its results might have been better. Believing, however, in our motto, *remedium non condemnatum est, donec id expertum sit*, we gave the remedy a trial in the following case, and with advantage:

Cubebs, Copaiba, Belladonna, etc., had been tried before we resorted to it. The person was a young man, in apparently good health, in whom, for a few months, the virile powers had seemed to have been exhausted; so much so that no erotic could, reflexly, induce an erection. He was twenty-four years of age; clerk in one of our large wholesale stores; habits every way regular; in good flesh, and, were it not for this failing, in good spirits.

There was nothing to lead one to believe that masturbation or sexual intercourse could have induced the failure of erection. The only concomitant symptom was a slight irritability of the neck of the bladder. After trying several remedies for this irritability, a last resort was made of bougieing and fluid extract of Damiana in drachm doses; the bougie, progressively to a No. 12, was introduced in five sittings. When it was discontinued, the bladder irritability being partly relieved, the Damiana was continued until he was capable of getting and maintaining an erection. That the bougieing could not have been the chief cause in inducing this return to power I am satisfied, as it was used three times before resorting to the Damiana with no apparent benefit, save an amelioration of the slight bladder trouble. It was only *after* the trial of the Damiana that erection was possible, although some irritation of the neck of the bladder was yet remaining.—"New Preparations."

Dr. J. J. Caldwell, of Baltimore, has given this new remedy a number of trials, and in the "Virginia Medical Monthly," in speaking of its medical properties, says:

"I am well satisfied, from quite an extended experience with the tincture and extract of this plant, of its powerful influence over the urino-genital organs of both sexes, as in moderate doses it increases the flow of urine as well as the sexual appetite." Dr. Caldwell then gives the reports of several cases where its powerful aphrodisiac effects were obtained after the usual remedies, such as Strychnia, Phosphorus, and Electricity, had failed. He then concludes: "The cases that have come under my observation are given as an introduction to this new remedy, and for what they are worth, solely with the view of calling the attention of the profession to the virtues of this pretty little plant, culled from the prolific soil of Mexico—a field, no doubt, teeming with a wealth of unknown medicines, waiting for the progress of a searching science to penetrate and grasp her hidden treasures. In its administration I prefer the fluid extract, as it is less bulky, more positive in its effects, and more reliable and uniform, as proven in the cases now under my care. In smaller doses, it seems to have a specific effect on all the or-

gans of the pelvis, giving increased tone and activity to all the secretions of that vicinity." I hope that future trials of this new and interesting remedy will fully verify the experiments of Dr. Caldwell, as the advantage of not being poisonous or dangerous in any dose is quite a decided one over the usual remedies, like Strychnia and Phosphorus, that are now employed as aphrodisiacs and nerve stimulants. Should this prove reliable and safe, it will doubtless be popular with the medical profession.—"Pharmacal Gazette."

"I observed in the 'Journal' of June last a notice of a new remedy described by Dr. J. J. Caldwell, of Baltimore, Md., in the 'Virginia Medical Monthly.'

"This remedy, Damiana, I have used extensively in Mexico, where the Mexicans employ it as a domestic medicine. I can bear testimony to the efficacy of this plant in cases of sexual debility, or lethargy of the sexual organs. In these cases the results are all that could be desired. The leaves only of the plant are used. An infusion is made of one ounce of the dried leaves to a pint of water, and this amount is given daily. In a few days the effects are manifest. The infusion has an agreeable aromatic and slightly bitter taste. I am not prepared to state if its properties are those of an aromatic or stimulating tonic, but as to its aphrodisiac properties there can be no question.

"There are but few bodily ailments that impose such discomfort upon the individual of either sex, as the inability to exercise the reproductive functions, and to beget and give birth to offspring. It is truly painful to witness the degree of misery which, in many instances, the subjects of such defects are by some unerring law of nature destined to endure. Young men of robust and apparently healthy physique often apply to physicians for some means of restoring the lost sexual desire. Standard authors recommend in these cases Phosphorus, Ergot of rye, Cantharides, Strychnia, etc., but physicians well know that these remedies do not always give satisfaction. Damiana appears to be the desirable remedy in such cases."—Dr. McQuestin in "Pacific Medical and Surgical Journal."

Dr. Alexander Murray, of New York city, relates in the "Medical Record" for August last the following cases:

CASE I was that of a lady, aged twenty-four, of a highly hysterical constitution, who was married about three years. Her menstruation was always regular, but scanty, of a pale color, and unattended with pain. She informed her husband that about a year previous to her marriage she had lost all sexual desire, owing, as she alleged, to a paroxysm of hysterical convulsions. She had strong hopes that the influence of matrimony would restore the lost appetite.

Her husband manifested great anxiety for her recovery, and especially as he was desirous of having family. A careful examination of the organs of generation showed that they were normal and healthy.

It was determined in this case to give Damiana a fair trial, in order to test its real or therapeutical value. I began treatment by giving the fluid extract in two drachm doses three times a day for one month, and then one ounce and a half in divided doses for the succeeding two months. During the third month she im-

agined she had recovered somewhat her sexual appetite. The use of the drug, however, produced a decided change in her physical appearance, making her robust and healthy, whereas before she had been thin and pale. She was naturally of a constipated habit, and consequently required the occasional use of purgatives. After the Extract of damiana had been taken for a few days, it produced large soft alvine evacuations, and subsequently the menstrual flow was both normal in quantity and color. The latter effect, I believe, was due altogether to the improved condition of her health, rather than to any emmenagogue properties in the drug.

CASE II.—Mr. K——, aged forty-two years, a native of Germany, merchant, had always enjoyed good health; never had syphilis or any other disease that he is aware of; and had not at any time indulged in the excessive use of stimulants or tobacco. About six months after his second marriage he experienced marked sexual weakness. He attributed the cause of his weakened powers to having been allowed, through neglect of the attendants, while taking a vapor or Russian bath, to remain too long on his back on a heated marble slab. He also stated that the excessive inhalation of steam during the sweating process produced palpitation of the heart, difficult breathing, and a sense of immediate suffocation. Soon after he left the bath-rooms he had a slight attack of vertigo, and experienced great difficulty in walking to his residence, which was about four blocks off.

Two months before he came under my observation he had been treated for impotence by a "charlatan," who, under the promise of a speedy cure, fleeced him out of a large sum of money. Mental despondency arising from the cares of business, with his anxiety concerning his young wife, drove him to the verge of insanity.

After a careful review of his case, I was doubtful of obtaining satisfactory results by any mode of treatment whatever, and accordingly held out no promise of success. However, I applied galvanism (interrupted current) to the spine every second or third day, for four weeks, and gave the Fluid extract of damiana in half-ounce doses, thrice daily for nearly nine weeks. About three months from the commencement of treatment he stated, to use his own words, that "he was a man again," and expressed himself very desirous of continuing the Damiana.

CASE III.—John B——, twenty-eight years, a robust, healthy-looking person; a house carpenter; never had syphilis; married about nine months. He attributed the cause of impotency to the taunts of his wife, whose propensities were stronger than his own. The consequence of this was the most unbridled excess in sexual indulgence during the first six months of matrimony. He was very despondent at times, and threatened to commit suicide in the despair of a cure. Separation from his wife for a time, cheerful society, and the administration of Damiana, resulted in about two months in restoring the sexual ability.

CASE IV.—Mr. Charles H——, aged thirty-four; clerk; short, stout, and vigorous; while walking fell and hurt his spine. He complained of severe pain in the lower part of the back (sacro-coccygeal region) and the left thigh. Micturition was for several days both painful and difficult. The shock to the spine produced impotency. He had neither desire for nor power of coition. His wife, a good, sensible woman, consoled him, and encouraged the hope that time and medical treatment would restore the lost functions.

About three weeks from the day of injury, faradization was employed daily to the spine for eight applications. As he was unable to attend to business, he resolved to go into the country for a short time until recruited. I supplied him with the Fluid extract of damiana sufficient for six weeks, with directions to take four drachms three times a day. He called to see me after an absence of two months, and reported that there was a marked improvement in his sexual ability. Subsequently, after two weeks, by too frequent marital intercourse, a diminution of virile power was apparent, and consequently he fell back on Damiana for a few weeks longer. Moderate indulgence was now strictly enjoined.

CASE V.—Mr. R., aged forty-six; a lawyer; had syphilis when a young man. He had an attack of apoplexy about four years ago, and for several days was in a precarious condition, but he gradually recovered consciousness, leaving the left side completely paralyzed. By judicious treatment and repeated applications of faradism, he was able in six weeks to walk about, and in less than three months to follow his professional avocations. Although sufficiently recovered to attend to his business, still he had been quite frequently despondent, as he experienced a marked loss of sexual ability. For this ailment he had consulted several physicians, followed their advice, and had used Phosphorus, Strychnia, Ergot, and electricity, without any apparent effect in restoring his virile power.

For more than two years he had given up all treatment as useless. I advised him to give Damiana a steady trial for at least two months, at the end of which time to let me know the result. There was a decided improvement in his condition. The power of erection, however, was not altogether satisfactory, and though at times it was sufficient to complete the sexual act, yet it very often failed at the important moment. His recovery, although not complete, had exceeded his anticipations, and encouraged the hope that Damiana would ultimately accomplish the desired result.

In a few cases of midwifery—inertia of the uterus—I have given four drachms of the fluid extract every thirty minutes, three succeeding times, without apparently augmenting uterine contraction.

I have noticed that when Damiana had been taken for a week or two it invariably produced (in about two-thirds of my patients) an eruption of acne on the head and body. It also induced large soft evacuations from the bowels, especially in those of a constipated habit. The drug did not act as a laxative, but more as an alterative—in fact, somewhat similar in its results to the Extract of belladonna when administered in chronic constipation.

I did not observe any marked effect on the heart, liver, stomach, or bladder. In a few instances I noticed the diminution of the phosphates, and almost the entire absence of the Oxalate of lime, which usually appears in the urinary secretions in cases of nervous affections, and especially in cases of impotency.

The value of Damiana in impotency is more apparent in stimulating venereal desire than in restoring the vigor or power of the virile member. In several cases the drug failed to manifest any curative effect, while in others, particularly in those arising from an attack of paralysis (hemiplegia), even of six or eight years' standing, it was more or less beneficial.

Damiana is by no means an agreeable remedy to take. The bitter, slightly acrid taste, and the "sagy" flavor are disliked by many patients. It sometimes

excites nausea or vomiting, especially when taken on an empty stomach, or when the dose is not largely diluted with some menstruum.

Generally I prescribe the Fluid extract of damiana in combination with equal parts of Glycerin and Syrup of tolu, or with some fruit syrup. Several of my patients have taken the drug in claret, Rhine wine, or lager beer, to disguise the taste, while many others prefer the cold, fresh infusion. Frequently I have prescribed, as an adjunct, diluted Phosphoric acid, from ten to fifteen drops with each dose of Damiana. This addition renders it pleasant and easy to take.

Dr. Van Arnum, of Washington, D. C., writes to the "Virginia Medical Monthly," for July, as follows:

I noticed in the "Monthly" for May an article on Damiana, with a list of cases showing the results attending its use. I also observed in the same issue an editorial notice of this new medicine, which concludes with an invitation for further reports from those who may have used the remedy; and as I have had a fine typical case, I give it to your readers:

Some months ago my attention was called to the properties of Damiana by a medical friend of this city, and having a case soon after, wherein the use of a medicine possessing the qualities claimed for Damiana were indicated, I concluded to give it a trial.

Mr. M., aged fifty-five years; has been a widower five years. Six months ago he became enamored of a young woman, proposed marriage and was accepted, and the day fixed for the wedding. Some weeks since he came to me in great distress, stating that he had been under treatment for some time for inertia of the genital organs, but without benefit. He stated that he had not had an erection for more than three years, and in view of his approaching marriage to a young woman was most anxious to restore the animal passions and powers.

I recommended the use of Fluid extract of damiana, in tablespoonful doses, every four hours. (I will here state that the wedding was postponed for three weeks.) After the use of the medicine for some two weeks and a half, he reported to me that he was in condition to consummate the marriage act. He was duly married and is now on his wedding-tour.

In the same journal, in the report of the meeting of the Medical and Surgical Society of Baltimore, under the discussion of "impotency," Dr. John Morris reported a case as follows:

Man; aged thirty-five; weight two hundred pounds; general health good, and has not been addicted to any imprudences. Has used Phosphorus, Nux vomica, Tincture of cantharides in drachm doses, and electricity, with no benefit. Latterly he has taken Damiana, during the use of which he has had one erection. He has been an inveterate smoker and ale drinker, but some months ago he stopped these habits. At first Dr. Morris was inclined to attribute these troubles to the cessation of the habits, or the state of depression resulting therefrom, and accordingly directed him to resume the moderate use of both; but this plan has

not been followed by any improvement. It has occured to him that the injection of Turpentine might do good.

It may be remembered that when Dr. Caldwell first wrote in favor of this drug, he was quite enthusiastic in its praise, so much so as to lead many to doubt the veracity of his statements. In an editorial in the "Virginia Medical Monthly," Dr. Landon B. Edwards, in writing upon Damiana, says:

To satisfy, however, to some extent, the curiosity that has been awakened regarding the value of Damiana, we will state that we have learned, indirectly, from a medical officer of the United States Army, who had opportunities a year or two ago of learning something of this drug, that it is of frequent use among the natives of the section of country where the plant is said to be indigenous, and that, according to the statements of these natives, the effects claimed by Dr. Caldwell for Damiana are not overstated. A private communication from a regular physician, of good professional standing, of Washington, D. C., also confirms in general the correctness of Dr. Caldwell's estimate of the drug.

Under the head of correspondence in this issue, and in the report of the proceedings of the Baltimore Medical and Surgical Society, will also be found confirmatory experiences. We have, moreover, the promise of a paper on the subject by a distinguished medical writer and professor in Baltimore, whose observations in the main are corroborative of the experience above stated. On the other hand, we have not heard of a single unfavorable experience, though we would be greatly surprised if such does not occur.

W. H. Myers, M.D., of Philadelphia, writes:

In June last I received a circular from Lehn & Fink, of New York city, calling my attention to Parke, Davis & Co.'s preparation of Damiana. Since then I have given it quite an extensive trial in my private practice, and, as a result, I find that in cases of partial impotency, or other sexual debility, its success is universal. In fact, it has produced favorable results in some cases that I deemed hopeless on account of their resisting entirely the action of the remedies usually specified in such cases. I therefore pronounce it the most effective and only remedy that in my hands produces a successful result in all cases. The only objection to its use is its liability to produce disorders of the digestive system; but by combining it with Cinchona and sherry wine it partially obviates that tendency. If you would produce it in solid form it would be much easier to administer as a pill.

J. F., aged forty-two; nervous temperament; who has been troubled for several years with spermatorrhœa, and has tried several physicians with a partial cure, came under my care on January 10th, 1877. I placed him on Damiana, drachm doses three times a day, and increased a drachm each week until four were taken, and then decreased in same ratio. I discharged him March 20th, instructing him to report if there was any return. This morning he

reported that there was no return, and he feels like a young man. He informed me that for the last four years he was unable to have intercourse. Now it is perfect.—J. MARSHALL BARKLEY, M.D., Farmer's Retreat, Ind.

Damiana has proved in my hands all that its earlier friends claimed for it as an aphrodisiac, and almost a specific for incontinence of urine in the old and debilitated when not dependent on organic lesion.—H. MALLORY, M.D., Hamilton, Ohio.

. . . . The Fluid extract of damiana, as a stimulant of the genital organs, has given me great satisfaction.—L. M. A. ROY, M.D., Editor "Le National," St. Paul.

LA PAZ, MEXICO, August 1st, 1877.

GENTLEMEN: In reply to your favor of late date, desiring to know the estimation in which the plant known as Damiana is held by the people of this section of Mexico, of which the plant itself is a native, I beg to say that it appears to be held in the highest esteem as a tonic, and that its use as such seems to be universal. The local physician prescribes it, in various forms, in nearly all cases of weakness, organic or otherwise, but especially in cases of impaired action of the generative organs, for which class of cases it is regarded as a specific.

The drug is certainly wonderful in its action in many cases, and remarkable cures from its use have occurred under my observation. Practicing physicians tell me they have rarely known it to fail, if used properly, and country people—"rancheros"—seem to repose more faith in the efficacy of this drug than in the doctors themselves, and look upon it as a sort of panacea for all ills. Their method of preparing it for use, generally, is very simple. They steep it, and add sugar, making a not unpalatable beverage, which is often used at table as we use our tea and coffee. Having great faith in its efficacy in extraordinary occasions, they think it proper in ordinary ones as well, and will often tender a cup of it to a guest, with an assurance that it is good as a preventive as well as a curative. In fact, their faith in it seems to be unbounded.

I take pleasure in giving this testimony, from a conviction, resulting from careful observation, that Damiana possesses tonic qualities that should be better known. Yours, very respectfully,

F. B. ELMER, late U. S. Consul.

I have been using several new remedies during the past year and have not been disappointed in any that I have tried. I had one patient who had by sexual abuse become partially impotent. Damiana perfectly restored his sexual powers. —W. H. DICE, M.D., Coloma, Mo.

I have used the Damiana of Parke, Davis & Co. in my practice in drachm doses, and find it to be a tonic in impaired action of the generative organs. One patient said he had not had an erection of the penis for three years. By taking Fluid extract of damiana he had regained all erective powers. It acts powerfully on the kidneys. I think a half drachm dose, three times daily, sufficient. —R. L. BLAKELEY, M.D., Rockford, Mich.

After a continued experience of several years with preparations of this

plant, commonly known as Damiana, and lately determined by Professor L. Ward as Turnera aphrodisiaca, I find that my first papers and experiments have been well sustained in establishing its merits as a powerful, permanent, and determined aphrodisiac, as well as an alterative aperient of remarkably fine quality; indeed, of such a nature that, should it possess no other medical value, this alone would place it high in the therapeutical world when well known and appreciated. My attention has been called time and again by my patients to this fact, that after a few days' exhibition of the fluid extract, which preparation I prefer to prescribe to all others, in doses of a dessertspoonful three times a day, their bowels have been moved, with mushy stools, often twice a day. My esteemed friend, Alexander Murray, M.D., F.R.C.S., of New York city, was the first to call attention to this feature of Damiana through "The Medical Record."

Damiana, beyond doubt, is the most reliable, useful, and permanent tonic to the genital organs of both sexes that we have thus far discovered. Of course it must be carefully selected and manufactured of the genuine plant—Turnera aphrodisiaca. (Western Mexico abounds with it.) Then, again, it should be given in full doses for a fair duration of time, say a dessert to a tablespoonful three or four times a day, for several weeks, to obtain the best results. Furthermore, those suffering from permanent organic injuries should be warned that Damiana, or any other remedy, is futile in their case. This has been, I am sure, another fruitful source of disappointment in the uses of Damiana. I earnestly urge the profession first to obtain the genuine article, then to give this new and most valuable medicine a fair trial. I feel safe in saying that eventually it will be classed among the standard remedies of our land.

The following is the additional history I have been able to obtain (so far) of the plant Damiana:

The Damiana herb has been a domestic medicine of Mexico, where it is generally used to invigorate the system. As far back as the year 1699, in the reports of the Spanish missionary, Padre Juan Marie de Salvatierra, we find it was known to the Indians as a cure for inability to exercise the reproductive functions in both sexes. The medicinal qualities of this shrub were first noticed by the Indian hunters, who, after wearisome journeys through parched countries, made a decoction of the Damiana, and drank it with avidity to invigorate their exhausted system, brace their nerves, fitting them for further fatigues. The qualities did not long remain a secret; the herb became familiar to all the inhabitants of Mexico, and has maintained its celebrity up to the present time. Acting as it does directly upon the nervous system, it restores, as it were, the debilitated functions of the principal organs of the human frame, and is unsurpassed as a nervine. In all cases where accidents have produced premature births, also during painful menstruation, and as a cure for the many afflictions suffered by women after gestation, this remedy will be found to build up the constitution quicker than any nervine or tonic with which we are acquainted. Persons who, from the effects of malpractice, are suffering from general debility will find this Extract of damiana a cure for all those chronic affections, giving strength and vitality to the frame, imparting muscular energy when general prostration threatened to undermine the constitution.—DR. CALDWELL, in "The Medical Record."

Damiana is one of those most valuable specific remedies introduced to the medical profession recently. Some men have tried it and reported unfavorably of it, and that is in consequence of poor preparations of the article. I procured a fluid extract from the most reliable house. The case in which I gave it a full trial was a large man, some forty years of age, who came to consult me for a loss of seminal power. He stated that he had some desire for sexual congress, but that he had no power of erection, consequently no ability to perform sexual intercourse. His general health otherwise was good. I put him upon half-drachm doses of Damiana (the fluid extract) three times a day, and in a few days he reported himself as very much improved, and after continuing it a short time discontinued the remedy. I look upon Damiana as one of the most positive tonics and stimulants that we have for the genital organs for male and female. But, like all good remedies, it must be prepared right. A great many of our best vegetable remedies have been condemned simply because imperfect preparations were used. Many vegetable remedies contain proximate principles that are not extracted by any simple mode of preparation, consequently the virtues are not obtained in ordinary preparations. Pharmacy is a science, and must be well understood to afford good preparations.—I. J. M. Goss, M.D., LL.D., Marietta, Georgia.

A gentleman, Mr. S., aged twenty-nine, applied to me for treatment for atrophy of the right testicle a few years ago. He suffered severely from orchitis in that testicle. He noticed that, after the inflammation passed off, it began shrinking, and was very sensitive. When I examined it, it was *soft* and *small*. I gave him Fluid extract of damiana some five weeks ago, one teaspoonful three times daily. The testicle has nearly resumed its former size, and the sensitiveness is all gone. "Richard is himself again."—M. D. C. M. SUMMERTON, M.D.

Says the learned Gross, "Reduced sexual power, from whatever cause it may arise, is one of the most distressing of maladies, and is therefore entitled to the deepest sympathy and consideration on the part of the honest practitioner, by whom unfortunately it is rarely discussed."

Dr. Gross also says from the intimate connection which exists between the urethra, the prostate gland, the seminal vesicles, ejaculatory and the deferential ducts, and the tubes, it is not surprising that lesions of that passage should exert a powerful effect upon the functions of generation, whether that effect be due to the extension of morbid action through continuity of structure, or to reflex action. Hence it is that many persons affected with urethral disorders suffer from more or less marked disturbance in their sexual power, amounting in some instances to impotence or inability to copulate, either from inability of introcession or premature ejaculation, both states being associated with imperfect or transient erections; in many cases dependent upon stricture, inflammation, hyperæthesia of the posterior portion of the urethra.

CASE I.—T. W., a young gentleman of wealth and somewhat "roue," called at my office September 25th, the very picture of health; aged about thirty; complains of a failure in his effort at copulation, owing to a partial loss of erectile effort. On examination I found the history of excessive venery only. The sound exploration failed to discover either stricture or tenderness of the urethral tract.

All other functions being normal, I advised him simple rest for a couple of weeks. After due trial he returned, reporting treatment so far a failure. I then placed him upon the Fluid extract of damiana, tablespoonful doses, well diluted, to be taken morning and evening, together with a generous diet, and a respite from all genital exercise. After ten days of such treatment he reported himself fully rehabilitated and fully potent.

CASE II.—September 2d. A gentleman of middle life, aged in the fifties, Mr. D., calls concerning an indescribable pain or sensation about the head, with a loss of power and desire for sexual connection; attributed it to great and continued trouble in his business relations. On examination I failed to find any lesions of the genito-urinary organs or functional disturbance of his alimentary canal. Indeed, he seemed in all respects a fair specimen of health, with the two exceptions named. I ordered him free use of Damiana, and occasionally, when the pain in the head was severe, application of the constant current of electricity to the nape of his neck, down the spinal column. His treatment was continued several weeks with very fair results, though his business troubles were still on his mind.

CASE III.—W. E. J., aged twenty-four, called December 10th, apparently in good health, but complaining of inability to perform the sexual act. I failed to discover any lesion of the urethral tract, or any other trouble about his person, except that his virile organ was small and flabby. He reports good erections when abed and alone, but utter failure of this effort when in company with a female about to copulate. I deemed this a case of genital demoralization, and placed him under the most advanced treatment for the same, with electricity, rest, moral suasion, cold baths, etc., and the very best Fluid extract of damiana, fully as to quality and time, but all in vain.

CASE IV.—R. J., aged fifty-four, called August 2d, complaining of a gradual loss of health, weight, and genital power. Here, too, we failed to discover any lesions of the genital organs. His seemed to be a case of general atrophy from debilitated digestion and assimilation of several years' standing, which yielded kindly to local and general faradization after a few months' treatment. But his genital organs were still weak and impotent; thereupon we placed him on liberal doses of Fluid extract of damiana, which acted like a charm after a few weeks' administration. The first effects were to cause two full mushy stools per day, accompanied by an increasing appetite, and finally a restoration of his lost sexual power.

CASE V.—Mr. J. H., aged twenty-five, called January 2d, suffering loss of copulative power. Upon an examination of the urethral tract, the sound was arrested by two strictures at the prostatic portion of the urethra. The neck of the bladder was found irritable with excessive mucous discharge. The strictures were gradually dilated by the appropriate instruments for that use; the bladder washed daily with a double silver catheter, using as a wash a weak solution of Atropia. Internally administered Gelseminum with the Bromide of sodium. This was continued until the acute symptoms had subsided, when Damiana was administered. The sound passed daily, through which a constant current of electricity was passed from the sacrum to the end of the sound. In all, this treatment lasted about one year. Since then the young gentleman has married and finds himself fully able to do family duty.

Spermatorrhœa.—Says Tanner, "Spermatorrhœa is a deranged state of mental and bodily health, due to too frequent escape of seminal fluid. Masturbation is the most common cause."

Symptoms.—There may be only a separate escape of the seminal fluid; or this may be associated with morbid changes in the vesiculæ seminales, ejaculatory ducts, bulbous portion of the urethra, and prostate gland. Urine sometimes rendered slightly albuminous by seminal fluid.

CASE I.—S. T., of North Carolina, aged forty-five years, called June 12th, suffering from frequent loss of the seminal fluid, due, as he said, to grief and sad reverses of fortune. The penis was small and flabby. Otherwise there was no lesion that could be found. His symptoms were as follows: general debility, with some emaciation; also much nervous irritability; complained of dulness of vision and of poor memory; bowels constipated and flatulent, with occasional attacks of giddiness, headache, and palpitation. In his case I suspected excessive venery, as he informed me that he had lately been in the habit of keeping a mistress who was greatly amative.

The treatment of his case was rest, a change of scene, nourishing diet as the hygienic measures. Medically, large doses of the Fluid damiana, which was continued through the months of June and July with the best of results, for his seminal losses ceased, he grew fleshy in body, and better contented mentally.

A few weeks subsequently he came to the city for the treatment of general rheumatic and neuralgic pains, which yielded kindly to Quinine and electricity. He had been visiting a malarial district. His old trouble (spermatorrhœa) had entirely disappeared.

The characteristics of Damiana (viz., alterative effects on the alimentary canal, and the tonic effects upon the urino-genital organs) were decidedly manifested in his experience with this drug. It will be well at this juncture to call the attention of the profession to the remarkable and beneficial action of this new drug (Damiana) in the various unhealthy or irregular discharges of the genito-urinary organs in the female as well as the male. Several of my medical brethren have strongly testified in its favor in the treatment of sterility, where the uterus and its appendages seemed to suffer simply from inertia. I have found it an excellent remedy in cases of amenorrhœa, dysmenorrhœa, and leucorrhœa.

CASE II.—MRS. B., aged twenty-eight, called April 6th, suffering from amenorrhœa. Had been married several years without issue; as a consequence was unhappy and anxious. Complained of excessive leucorrhœa, though apparently she was robust and healthy. Cheeks rosy, still she complained of nervous irritability, and had a dreamy and absent kind of manner.

Hygienic Treatment.—Moderate mental and bodily work, cheerful society, to avoid heavy meals, to sleep on a hard mattress and alone during treatment.

Medically, ordered the use of Fluid extract of damiana, teaspoonful doses, in milk, three or four times a day; to omit tea and coffee and other stimulants; to drink freely of milk or buttermilk. After pursuing this treatment two months all her symptoms improved, became perfectly regular in her menses, became pregnant at fourth month, and was delivered at the end of the regular time of a healthy boy.

CASE III.—Mr. D. H., aged twenty-four, called January 7th, suffering from

spermatorrhœa. He complained of loss of seminal fluid night and day, and particularly after he had passed his water or fæces. He attributed it solely to masturbation, and from his general appearance I judged he was correct. He, too, suffered from general weakness, nervous irritability, with a dreamy, absent kind of manner. Flatulence and constipation. Dulness of sight and perhaps of hearing, weakness of memory, attacks of palpitation, giddiness, headache, and neuralgia. He would keep his bed a week or two at a time, and frequently go days without eating or speaking a word to any one. This condition had existed for a year or more, when his father, fearful that the young man was about to lose his mind (judging from his eccentricities and from many odd and unusual ways), called my attention to his case, when I obtained the above history.

Hygienic Treatment.—I placed him under the best hygienic influence, and required him to make daily calls at my office, when I used moral suasion and encouragement, endeavored to instil better ideas, more manly thoughts and actions, to imbue him with brighter hopes for the future; also instructed his family to put themselves to greater efforts to make home attractive, cheerful, and pleasant to him. (Happy home influences surrounding youth is a matter worthy of our most earnest solicitude, attention, and study, and were it more generally inculcated throughout our land, how many young and gallant wrecks might be saved upon the ocean of every-day life!)

Medically, I relied upon our old and tried friend, the different preparations of Damiana, with entire success; though in his case it required better than a year of skilful management to complete the restoration mentally and physically.

As to the combination with milk I may casually say that all the preparations containing gum and rosin solutions are more agreeably taken and more readily assimilated when held in suspension in milk. I also would note that I have found all the bromide salts to be more ready of use and to give better results when held in solution in milk.

Chronic Prostatic Discharge.—CASE IV.—Mr. K., aged twenty-six, called on February 2d, suffering from chronic prostatitis and continued loss of prostatic fluid, dripping away from the head of his penis upon his underwear. The history of the case was that this trouble originated from a long-neglected gonorrhœa, and frequent exposures to cold and unhealthy locations. His symptoms were pain and tenderness about the perinæum, with a sense of heat and frequent efforts at passing water. He had pain on defecation; feeling of pain about the perinæum and rectum; experienced pain when passing the catheter.

Treatment.—Perfect rest in bed; warm baths; used Belladonna to perinæum; bromide in solution of milk as injections per rectum; simple nourishment without stimulus; all this until the acute stage had passed. Then I placed him upon Damiana as an alterative and tonic, which treatment was maintained for several months, or indeed until all his unhappy symptoms had disappeared.

In conclusion, I will state that these are but a few of the typical cases of chronic urino-genital diseases that have come under my observation during the past year or more where I have given this new remedy, Damiana (Turnera aphrodisiaca), a full and fair trial, with results more satisfactory than any other course that I have tried or had knowledge of in an extended experience in these troubles, and

I would most cordially solicit my medical brethren to give it (the genuine article) fully and freely in such cases as are named above, and report their experience for the benefit of the profession at large.—DR. CALDWELL, in St. Louis "Medical and Surgical Journal."

Damiana as a Nerve Tonic.—My views on Damiana as a sexual tonic are known to a very large number of the members of the medical profession. Further experience has strengthened the high appreciation I have expressed of its value in sexual debility, and given me, I think, some new ideas as to its physiological action and position as a remedial agent. It is pre-eminently a nerve tonic, impressing the brain and nerve-centres very much in the same manner that Strychnia does. While, however, void of poisonous properties, it excites nerve-cell nutrition, and enables the nerve-cell to assimilate its proper pabulum from the blood.

For the medulla oblongata and the medulla spinalis it has an especial affinity. The motor nerves seem more impressed by its influence than are those of sensation. Hence I inferred that it would prove valuable in paralysis. Opportunities offering I tested the accuracy of this inference in two cases—one hemiplegic, the other paraplegic. In both Damiana proved of unquestionable efficacy; the advantage was as unequivocal as I ever witnessed from the use of Strychnia and Ergot.

If my theory of its *modus operandi*—that it acted as an invigorator of the primordial nerve-cell—be correct, it is easy to understand its true place in the treatment of certain forms of paralysis, as well as other nerve lesions in which deficient cell nutrition plays an important part. Damiana, by its direct action as a nerve tonic, by removing the morbid condition or stimulating the cells in inactive conditions, supplies a great want in therapeutics.

If impotency has accrued in the male from inability to secure the necessary erection to convey the seminal fluid into the female, and to produce in her the very important yet not absolutely essential orgasm for impregnation, this remedy, in the absence of organic or structural change, will almost invariably overcome the difficulty. It accomplishes all, and even more effectually, the results obtained by combinations of Iron, Strychnia, Ergot, and Cantharides.

In several cases of nervous exhaustion I have found the organismal hypophosphites to give rather negative results, on account of the nerve-cell being unable to imbibe its proper pabulum. In such cases I have used Damiana alone with evident benefit; but the two agents together are almost magical in their effects.

I have recently used these two agents in combination with extract of malt, and the result has exceeded my fondest expectations in several cases of malnutrition and general cachexia. I have also noticed that the capacity for both physical and intellectual labor is increased by the use of this combination.

Recently I used Damiana in a case of obstinate constipation, and found the trouble entirely removed, and this after having used a multitude of remedies. Whether the result in this case was a mere coincidence, or will again occur, I shall determine by future trials. I believe Damiana can be advantageously used in all cases in which Strychnia is now employed.

The preparation I have used is the fluid extract, either prepared by myself by

cold repercolation, or by Dr. F. O. St. Clair. I abstain from heat in making it, as high temperature is as fatal to Damiana as it is to Wild-cherry. May not the use of heat in the manufacture explain the reason why so much of the fluid extracts found in the market are utterly worthless, and has brought so much reproach to be shared by the properly prepared and valuable article?

Damiana, like Ergot, isolated Phosphorus compounds, Podophyllin, and other valuable agents, has had its good name traduced, and at it has been hurled the usual remedy of the weak, ridicule; but truth, as it always will, has triumphed, and this agent is no doubt destined to an officinal position in our Pharmacopœia. —C. G. POLK, M.D., in "Virginia Medical Monthly."

URTICA.

The Stinging-nettle has many points of resemblance to Apis. It also resembles Formica, as it should, for its stings contain Formic acid.

Its chief use in our school is in the treatment of *urticaria*, for which it is prescribed internally, and as a lotion or cerate. It seems best adapted to that variety called *urticaria nodosa*, in which the skin appears elevated, with a white central spot and red areola, and attended by stinging and burning. It is also useful when the eruption recedes, and causes *vomiting, fainting,* and *sometimes diarrhœa.* This result often occurs in children when we do not suspect such an origin. It has been used for *dysentery, enteritis, strangury, gravel, hæmaturia, suppression of milk* in nursing women, *hæmoptysis,* and *menorrhagia.* It is said to have cured rheumatism (some rheumatic pains are relieved by the appearance of nettle-rash). The seeds are reported to have removed goitres.

USTILAGO MAIDIS.

In Dr. Burt's introduction to his monograph on Ustilago, he writes as follows:

The Ustilago maidis is a parasitic fungus found growing on maize (Indian corn), as Ergot does on rye.

The medical history of Ustilago maidis, as far as I have been able to learn, is very meagre. All that is known of its effects will be found in Professor Hale's "Causes and Treatment of Miscarriages and Sterility." He says: "In a cow-house where cows were fed on Indian corn infested with this parasite, eleven of their number aborted in eight days. After their food was changed none of the others aborted."

Lindlay says: "Its action on the uterus is as powerful as the Ergot of rye, and

perhaps more." Roulin says: "Its use is attended with shedding of the hair, both of man and beast, and sometimes of the teeth. Mules fed on it lose their hoofs, and fowls lay eggs without any shells." Tulley, in his mention of this fungus, adds: "It is probably by its abortifacient power that it causes the eggs of fowls to extrude before there has been time for a shell to be formed. By what power does it cause this shedding of the hair of man and brute animals, and the casting off of the hoofs of mules long fed upon it?" Dr. E. M. Hale adds: "It would seem capable of great curative powers."

The better to be convinced of the poisonous nature of the fungi, the author, after having dried and pulverized them, administered six drachms to two bitch dogs with young, which soon caused them to abort.

Besides Dr. Burt's provings, published in his monograph, others have been instituted by Dr. Hoyne. None of the provings were made on a healthy female organism.

It is not strange that Ustilago was not long ago substituted for Ergot, for I found in a journal of pharmacy, published several years since, a chemical analysis of Ustilago, in which it stated that it contains a large percentage of Ergotin. I am of the opinion that Ergotin, or some analogous constituent, would be found in all of the fungi which grow upon the cereals. It is highly probable that the frequency of abortion in cows and other domestic animals may be due to the presence of these fungi in their food.

Ustilago is not identical with Secale, however, for it contains active principles which the latter does not. We cannot substitute the one for the other in all cases, *e. g.*, Ustilago will probably not prove as potent as Secale in cases where we wish to cause the uterus to contract upon the fœtus in labor, at least it has not yet been used for that purpose; while in chronic passive hæmorrhages the Ustilago is claimed to be superior.

The sphere of action of this remedy includes (*a*) the generative organs; (*b*) the skin and analogous structures (hair, teeth, nails); (*c*) the vessels and tissues of the generative organs specially. It probably acts upon the spinal cord in a manner similar to Ergot, but not as intensely. It would seem that it affected the *trophic* nerve-cells in a special manner. No published experiments on animals have come under my observation illustrating its action on the cord and brain.

Its action on the *skin* appears to be very intense. Dr. Burt's statement of its supposed effects on the scalp, where an eruption

appeared, discharging a watery serum, matting the hair together, and causing it to fall out, seems to confirm the statements of the authorities above quoted relating to its effects. But Burt's case has not been verified by others, for the Ustilago has been given to patients in similar doses for a long time without causing any such results.

The statements of Tulley, Roulin, and other trustworthy writers, that it "causes mules to shed their hoofs, and men and animals to lose their hair and teeth," must be accepted.

The hair, hoofs, nails, and teeth, are but prolongations of the true skin. Any drug which profoundly affects the skin will probably affect similar structures.

Ustilago appears to act by preference upon the thickest and hardest of the dermoid tissues. Its action in this respect resembles the effects of such diseases as ichthyosis, syphilis, and tuberculosis.

Therapeutically the Ustilago will be of probable value in *alopecia, tumors of the scalp,* and some severe eruptions.

It has been found curative in urticaria (large, pale welts). "It caused an eruption similar to rubeola," says Burt. I advise it in painful and destructive disease of the nails. It is possible that it may be useful in those instances where young children lose their teeth soon after dentition, especially if they decay at the root first, become loose, and finally fall out.

Dr. Burt predicts that Ustilago will prove useful in *neuralgia of the testicles, irritable testes, chronic inflammation with induration,* and *spermatorrhœa.* He gives two cases of the latter disorder which were cured or greatly benefited.

I cannot agree with Burt that the poisonous effects of Ustilago upon the generative organs of the female "centres in the ovaries."

The ovaries are not the seat of the *motor* actions of the uterus, and it is upon the motor functions of that organ that the action of Ustilago is manifested.

I do not doubt the specific action of Ustilago on the ovaries, but I think too much stress is laid upon such action.

In the hands of many homœopathic physicians it has cured *menorrhagia, metrorrhagia,* and hæmorrhage from the uterus after labor or miscarriage. But the ovaries are not always to blame in

these conditions. It is only in a few cases of menorrhagia that we can consider disorder of the ovaries as the exciting cause.

Dr. Burt is far too enthusiastic when he asserts that *ovaritis, ovaralgia, amenorrhœa, dysmenorrhœa, irregularities of the menses*, etc., are all curable by the Ustilago.

I do not consider it homœopathic to any inflammation of parenchymatous structures. It is only in certain abnormalities of growth or function that it is suitable.

Like its congener, Secale, it is probably homœopathic (primarily) to motor irritation of the uterus and ovaries, with contraction of their tissues and bloodvessels. During this primary action we get uterine spasms, cramps of the broad ligaments, ovarian pains, miscarriage (with *slight* active hæmorrhage), and premature labor.

From its secondary action would occur passive congestion of the uterus, with passive hæmorrhage, hypertrophy, displacements, and tumors of that organ. The ovaries would be affected in the same manner, causing enlargement, irritation, tumors, and finally paresis—leading to sterility.

Dr. J. H. Woodbury, of Boston, in a paper contributed to the "New England Medical Gazette," gives such a clear idea of the general therapeutic action of Ustilago that I quote it entire:

> This substance has many points of similarity to Ergot, and also some of radical difference, to which I propose to call attention in the course of this article. Perhaps there is no drug in the whole scope of the Materia Medica concerning whose value and efficiency there is a greater diversity of opinion among physicians than the one under consideration. While some are loud in its praise as a medicine of undoubted energy and efficiency, others have come to look upon it as altogether inert and worthless.
>
> Two causes have doubtless contributed to this widely different estimate. First, a truer knowledge of its sphere of action may have enabled some physicians, in the absence of any thorough and reliable provings, to prescribe it more successfully than those less familiar with its peculiarities and characteristics; and second, the quality of the drug used has, in many cases, I am fully convinced, made all the difference between a perfect success and an entire failure. Like the Ergot it deteriorates rapidly with age, and I feel very little confidence in any specimen more than a year old. Great care also should be exercised in gathering this fungus. It should be selected in the field, at maturity, before it has been injured by the heavy autumnal rains and winds. Very little value remains in this drug after having undergone the heating process incident to the gathering and husking of the corn, hence it should never be obtained either from the shock or the bin.

The properly selected specimens, shortly after being gathered, should be made into a tincture, or carefully dried and triturated. But however carefully prepared, it soon begins to lose its strength, and in a few months becomes nearly or quite inert. One cannot but feel that this was the condition of the drug used in some of the published "provings" of this medicine, contained in various reports and journals. Having used this remedy quite extensively during the past three years in the treatment of various uterine diseases, I will add a few therapeutic hints, with cases illustrating its action. As before observed, it has a general resemblance to Ergot in its physiological action. It controls *uterine hæmorrhage* and induces *uterine contractions* in a manner similar to Ergot, but not with the same promptness or vigor. Somebody has called Conium "the Aconite of chronic diseases," with only a moderate degree of accuracy, however; but Ustilago is pre-eminently the Ergot of chronic uterine hæmorrhages and passive congestions. I would not give it in active hæmorrhages from an enlarged uterus with dilated os and cervix, when the blood is of a bright-red color, and readily coagulates; in such cases, even if Secale was not deemed the similimum, our Materia Medica would furnish many remedies efficient and more prompt in their action than the Ustilago; but where for many days there has been a slow but persistent oozing of dark blood, with small, black coagulæ; when the finger, upon being withdrawn from the vaginal examination, is covered with a dark semifluid blood, as though partial disorganization had taken place; when the uterus is enlarged, the cervix tumefied, and the os somewhat dilated, but swollen and flabby, indicating that the whole organ is in a most passive and congested state; when in spite of all treatment the blood continues to ooze day after day simply from lack of some means of overcoming its "invincible inertia," the Ustilago is, in such cases, a remedy of most gratifying promptness and efficiency. It has shown itself able in several cases not only to control the hæmorrhage, but to remove the entire pathological condition upon which the hæmorrhage depended.

CASE I.—Mrs. D., a brunette, stout, and inclined to corpulency, two years married, had, about one year since, a severe hæmorrhage; abortion was suspected but no ovum discovered. Since then she has had frequent and long-lasting attacks of hæmorrhage of dark, very offensive-smelling blood; the menstruation was of a similar character, and during her intermenstrual periods she had a copious and most offensive yellowish discharge. Any unusual exercise was followed by flowing, lasting for several days. The cervix uteri and fundus were greatly enlarged, but not sensitive to the touch. Various remedies were administered, among which were Sepia, Trillium, Crocus, Secale, Ipecac., and Sabina, all of which had a fair trial, but without any appreciable effects. Applications were made to the os of pledgets of cotton saturated with Glycerin, pure and also in combination with Iodine and Carbolic acid. These produced their usual characteristic, copious serous discharges, but without sensibly diminishing the size of the womb. At this juncture I determined to dilate the cervix in order that I might obtain an accurate idea of the condition of its cavity; since from the character and frequency of the discharges I feared the existence of some form of neoplasm.

It was necessary to postpone this operation, however, some four weeks on account of some engagements of the patient, and during this time I gave her a

package of powders of Ustilago, 1st trituration, with directions to take one three times a day for the next twenty days. At the expiration of that time she returned with a most favorable report. The leucorrhœal discharge was much diminished in quantity and its odor less offensive. She now took long walks without a recurrence of the flowing, and her menstrual period, which she had just passed through, lasted only five days, instead of eight or ten, as previously. On examination I found the hypertrophy considerably lessened. The same treatment was continued for four weeks longer, the patient meantime making a visit to New York, which she had deferred a long time on account of her liability to excessive flowing from extra exertion. On her return she pronounced herself well, and treatment was discontinued some four months ago. Up to this time there has been no return either of the hæmorrhage or of the leucorrhœa. It may be asked, Upon what data was Ustilago administered in the above case? In reply I would say, that in the absence of any reliable provings upon the female organism, I gave it upon the hypothesis that if this medicine was capable of curing hæmorrhage resulting from chronic congestion or simple capillary engorgement, why might it not remove the engorgement itself. The result proved the correctness of my reasoning.

CASE II.—Miss S., blonde, tall, slender, sanguine temperament, subject to copious menstruation, was attacked with hæmorrhage at a wedding reception, which she had made great exertion to attend, travelling to New York and back in two days for that purpose. The hæmorrhage was not very copious, the effused blood being of a dark color, with slight, stringy clots. She suffered great pain in the uterine region and through the inner portion of the right thigh half way down to the knee. She took Opium and astringents from an allopathic physician for ten days without benefit. When she applied to me I found the symptoms as above stated. A digital examination revealed a considerable enlargement of the cervix uteri and fundus, with great tenderness to the touch, both internally and externally. The hæmorrhage, though not very copious, was persistent. The stain left by the blood upon my finger after the examination was of a dark-brown or mahogany color. She had occasional attacks of very severe pain through the uterus and extending down the right limb, alternating with intervals of entire freedom from suffering. I gave her Ustilago every three hours. The next day I found her manifestly improved; continued the same medicine for six days, when she reported to me that she was entirely well. No other medicine given.

CASE III.—Mrs. H., brunette, mother of four children, subject to irregular menstruation. It was sometimes absent for three or four successive months, then too frequent and very copious for a week, after which it was continuous, scanty, and dark-colored for an indefinite time, frequently for ten or twelve days, as at present, with a great deal of pain in the uterine region, "not spasmodic and cramplike, but a steady hard ache." Digital examination revealed hypertrophy of the uterus, with a soft spongy os and cervix, which was sufficiently dilated to easily admit introduction of the finger. The blood was dark, but so thin as scarcely to color my finger, though some small black clots were found in the vagina. She had taken from her "domestic" case, Crocus, Hamamelis, China, Platina, and Pulsatilla, each one day, but with very little relief to the pain, and no diminution of the flowing, which had now continued seventeen days. Ustilago

was given in powders every two hours. Next day the pain was much less and the flowing nearly ceased; two days after both had entirely disappeared. Believing the menstrual irregularities to be due to the long-continued passive congestion of the womb, I continued the use of the Ustilago twice a day during the intermenstrual period, and twice a week applied Glycerin to the os and cervix. The next menstruation was regular in time and normal in quantity, and has so continued since March last, now six months.

CASE IV.—Mrs. F., a blonde with auburn hair and blue eyes, has always suffered from excessive menstruation; has never been pregnant. Three weeks prior to my being called, her menstruation came on with unusual copiousness and pain, and has continued, scarcely lessened, ever since. Has taken a great variety of remedies, allopathic, homœopathic, and domestic, but without much benefit. The blood was bright, fresh, and without coagulæ, but examination revealed the same hypertrophied, sensitive condition of the uterus, and this determined me to try the Ustilago, which I did as before, the first trituration, every two hours. Improvement was manifested within twenty-four hours, and the flow ceased at the end of three days. I might cite many more cases of a similar character, but these are sufficient to clearly indicate what I deem to be its sphere of action, and that is, briefly this: hæmorrhages caused by or attendant upon passive, chronic uterine congestion, characterized usually by hypertrophy of the cervix, frequently of the entire organ, with oozing of dark blood, slightly coagulable, though forming occasionally long, black, stringy clots, similar to those indicating Crocus.

How much more ample its sphere may be remains to be learned from future investigations, aided, I trust, by the thorough provings to be made by the coming Female Provers' Union. Before closing this paper I must acknowledge the valuable aid I derived in the beginning of my investigations from a very brief report by T. Bacmeister, M.D., contained in the report of the American Institute for 1872, and which I think strikes the "keynote" of this medicine.

Dr. H. K. Bennett, of Fitchburg, writes: "I have used the Ustilago successfully in several cases of menorrhagia and in one case of abortion where the flowing had lasted for several days, greatly reducing the patient; the effect was apparent at once and the hæmorrhage arrested in six hours. In post-partum hæmorrhage I much prefer it to Secale or Macrotin."

The cases cited by Dr. Woodbury, and the special indications given for its use, all simulate the *secondary effects* of Ustilago. All of Burt's cases (9 or 10) presented symptoms of the same character.

Ustilago will rarely be used for its primary hæmorrhagic symptoms, for there are other remedies, as Woodbury says, which appear more appropriate; but used in a high attenuation it will promptly cure the spasmodic and others of its primary symptoms.

Many cases of *dysmenorrhœa* have been cured by Ustilago. Some of them were of the variety known as *pseudo-membranous*,

in others the pains were spasmodic. Dr. Burt failed to cure cases of congestive dysmenorrhœa, with violent spasmodic pains, for the good reason that it is not homœopathic to active congestion.

It is claimed that Ustilago has reduced the size of some ovarian and uterine tumors. I doubt its value in ovarian tumors of any kind, except in an incipient stage, as a preventive, but the Ergotin it contains may make it curative in uterine fibroids in an early stage, also for the expulsion of polypoid growths.

It is primarily homœopathic to *scanty menses*, with spasmodic pains, but no active congestion. Use the 12th trituration.

It is secondarily indicated in *profuse, premature,* and *long-lasting menses*, from passive congestion, paresis (atony) of the uterine tissues. In such cases use the lowest triturations.

In *uterine atony after labor*, as well as on other occasions, I should expect to find Ustilago, in appreciable doses, very efficacious; also, in subinvolution of the uterus.

I believe it will prove one of our best remedies in a *tendency to miscarriage.* I allude to an habitual tendency to abort at periods corresponding to the menstrual; or to loss of the fœtus from the slightest overexertion, at any time, or from the shock of mental emotions. When ulceration of the os is present as a cause of the abortion, Ustilago will not prove as effectual unless the lesion is cured by local applications. In these conditions I should use it in the 3^{x} trituration, but when used to prevent premature labor I would advise a higher attenuation. I do not believe it will ever prove equal to Caulophyllin in such cases.

VERATRUM VIRIDE.

This indigenous species has attained great popularity in all schools of medicine, not only in this country but in all others where medicine is progressive.

It is a little singular that the two species, the *viride* and *album*, although said by chemists to possess similar constituent principles, should be used in almost diverse conditions. Homœopathists, who use both very extensively, never use the *album* for fever, and rarely, if ever, the *viride* for choleraic symptoms or collapse.

This shows conclusively how valueless the results of chemical

analyses are when we wish to know the exact powers of drugs; and that a thorough series of experiments only can give us exact knowledge of their curative power.

The medical history of this plant may be of interest.

Dr. Osgood states that this plant was known to the aborigines as a poison rather than a medicine, and he adds, on the authority of Joslin, that it was made use of by them in the election of their chiefs, the individual whose stomach was the least susceptible to its deleterious influences being regarded "as the strongest of the party, and entitled to command the rest." It was also popularly used by the farmers of New England to catch and destroy the birds that ravaged their cornfields. It had long been employed by the late Dr. Tully, and other New England physicians, as a medicine, when attention was, for a time, particularly attracted toward it, in 1835, by an essay of Dr. Osgood. It was, however, but seldom prescribed until the appearance of a paper by Dr. W. C. Norwood, of South Carolina, in 1850. For a time it was extensively used and *abused* by the allopathists and eclectics. The first homœopathic physician to call attention to this medicine was Dr. Henry, in 1852, who mentioned its use in cases of typhoid fever. Soon after this it was used by Dr. Pope, of Washington city, Dr. Jackson, of Boston, and a few others. I commenced its use in fevers, particularly in pneumonia, in 1855, and it has been a standard remedy in my practice ever since.

In 1863 the writer had some correspondence with Dr. Burt, and then suggested that he make thorough provings of the Veratrum viride. In 1864 Dr. Burt made an experiment with massive doses. It is one of the most heroic provings in our literature. Had we extended provings of the drug, made with the attenuations, our knowledge of its remedial powers would be greatly increased. No other provings, however, of any value have appeared.

Its poisonous action *on animals* has been very fully studied by Drs. H. C. Wood, S. R. Percy, Peugnet, Simon, Oulmot, Adams, and Burt.

I shall allude to these experiments when treating of its general action.

On Men.—In its local action, Veratrum viride is an active irritant. Its powder snuffed into the nostrils excites long-continued

and violent sneezing; applied to the skin, in a moist state, it produces redness and burning. Osgood found that two grains of the powder caused him to vomit, and observed that the act was at first *unattended* by nausea, and seemed to be performed by the contraction of the stomach and œsophagus alone. But in another person, who also presented this peculiarity, emesis was subsequently persistent and violent, and attended with bilious dejections. Norwood says that it is one of the most certain and powerful emetics, but may produce extreme nausea, as well as vomiting, which is sometimes continuous. Robert, a French physician, says that the pulse may be reduced by the drug as low as thirty-five beats per minute *without* nausea or vomiting! Osgood, Norwood, Raynor, and others assert that it does not cause *catharsis*, while Pendleton, Platt, and others quoted by Stillé, assert it to cause "*copious watery evacuations per anum.*" The same authorities have known it to cause the following conditions:

Faintness, somnolency, coma, dimness of sight, dilatation of the pupils, vertigo, headache, rarely delirium, impaired muscular action, general numbness, slow and infrequent respiration, hiccough; a pale, cold skin, covered with clammy sweat, persistent vomiting, excruciating pain in the præcordia; profuse, watery diarrhœa in some cases, and a small, infrequent, and generally feeble pulse. Alarming and apparently dangerous as these symptoms are, it does not appear that they have terminated in death; on the contrary, they have generally been dispelled by administering diffusible stimulants.

The action of American Hellebore strongly reminds us of the "Helleborism of the Ancients," so graphically described by Hahnemann. It is said that very few persons died from the apparently dangerous effects of Veratrum *album*.

This case was reported by Dr. W. H. Woodbury:

Prescribed for a gentleman about forty-five years of age, as an expectorant, forty drops of the tincture of Veratrum viride in an ounce of water, and directed a teaspoonful of the mixture to be taken every three hours. The first dose was taken as directed, the patient waited an hour, and not perceiving any particular action from the medicine concluded that the dose which I advised was much too small to affect him, and that it would be perfectly safe to take any quantity of the medicine, or even take the whole contents of my pocket-case at one dose. He took a tablespoonful of the preparation, in all twenty drops of the tincture. From ten to fifteen minutes after taking the enormous dose he experienced a burning sensation in the throat, œsophagus, and stomach, dizziness and pain in

the head, with dimness of vision, dilatation of the pupil of the eye, severe nausea, but very little vomiting. I was called about half an hour after the last dose had been taken. Found the patient in great distress, very pale, with a cadaverous look; convulsive breathing, almost to suffocation; pulse very small, about forty per minute; extremities cold, to the elbows and knees; a profuse cold perspiration over the hands and face; weakness and stiffness of the limbs, with frequent efforts to vomit, and extreme prostration. I ordered an application of mustard and vinegar to the chest, and prescribed Ipecac., which produced full emesis of mucous and bilious substances, vomiting profusely five or six times, after which I prescribed Camphor and whiskey, a teaspoonful every ten minutes at first, and continued as the case required. Narcotic symptoms were now more manifest; the patient became somnolent, soon followed by lethargy, which continued four hours, from which he awoke feeling much better, though very weak, and complained of an indescribable sensation, more manifest in the limbs than elsewhere. I advised exercise in the fresh air, which he took by the aid of an assistant, which produced beneficial results, and the following day he was able to attend to his usual business.

Dr. G. N. Edwards, Assistant Physician to St. Bartholomew's Hospital, reports the following case:

On Thursday evening, December 18th, I was summoned to see a gentleman, a scientific chemist, who had taken, experimentally, one drachm of Tincture of green hellebore (equal to about twelve grains of the powder). On my arrival I found him sitting in the water-closet, vomiting into the pan. His features were sunken; skin cold, and covered with a profuse clammy sweat; his pulse quite imperceptible. He complained of intense pain about the epigastrium. The vomited matter appeared to consist at first of the food and contents of the stomach, afterwards of glairy mucus. I gave him immediately about an ounce and a half of pure brandy, which at once checked the vomiting. At this time I was joined by Mr. Buxton Shillitoe, the patient's usual medical attendant. As he had slightly rallied, we had him removed into a room a few yards from the water-closet, and laid on a couch in front of the fire. The surface of the body was still very cold, especially the extremities. The clammy sweat continued, but the pulse could be felt indistinctly, beating very feebly and irregular, forty-four in the minute. A dose, containing Sp. æther. sulph. co. one-half dr., and Sp. ammon. arom. one dr., was given, but immediately rejected by the stomach; but some brandy, given directly afterwards, was retained. A large mustard poultice was applied to the epigastrium, and a hot-water bottle to the feet. Two or three efforts at retching afterwards took place, and he once or twice vomited food, mucus, and a small quantity of blood. Warmth gradually returned to the surface, and the pulse became somewhat better in volume and power. Brandy was given at short intervals, and after about an hour a second dose of Ether and Ammonia, which was retained. The patient then fell asleep, slept for about a quarter of an hour, and awoke with the expression, "I am all right now," and appeared comparatively well. There was no diarrhœa throughout. He had two or three times a slight return of the symptoms; did not sleep during the

night, but was quite easy; and the next morning only felt the discomfort arising from the mustard poultice, and the soreness of the muscles caused by the retching. He then gave us the following account of his feelings during the attack:

Before taking the dose of the tincture I had consulted Pereira, and finding Dr. Meade's dose of the Tincture helleborus niger to be two teaspoonfuls twice a day, and knowing the green Hellebore to be of the same tribe, I considered, in taking one teaspoonful, I was rather under than overdoing it. The drachm of the tincture was taken about half-past 4 or a quarter to 5 o'clock P.M., and my stomach soon afterwards whispered that I had admitted a troublesome guest. I went upstairs and sat down, thinking a cup of tea would set all right; but the uneasy constriction of the stomach continuing, with a tendency to sickness, made me retire to the water-closet. The sickness, once commencing, soon became alarmingly violent, with the most excruciating pain in the lower part of the stomach, the pain extending to about the size of my hand. The feeling at the seat of the pain was, that all the warm tea, water, etc, that I took to provoke the vomiting, went under the pain, making the constriction more and more violent. Finding the case getting desperate, I sent off for medical aid. The pain continued to increase, and the ejection of the stomach was now glairy mucus with blood, with running from the nose and eyes. The most painful and profuse cold sweating now came on, and the difficulty of breathing became more and more labored. I could not help wondering at the presence of anything like heat or constriction of the throat; my mind was perfectly calm, and although I thought it more than probable that I should die, I did not feel alarmed. Hearing and recognizing the voice of one of my medical friends is all I recollected for some time afterwards. Immense circles of green color appeared round the candle, which, as vertigo came on and I closed my eyes, turned to red. The pain continued excruciating at the pit of the stomach, and a slight tendency to cramp existed when my legs were touched. It was some hour or more afterwards when I awoke and found myself comparatively well. The sting of the mustard I can well recollect, and the horror of being forced to swallow brandy is even now with me. My bowels were not at all acted on.

A case of poisoning is reported by Dr. W. H. Burt:

My little girl, aged twenty-one months, got hold of my pocket-case, and I found her sitting down eating medicine. She had a bottle of Veratrum viride in her hand, with the cork out, and its contents emptied. It contained one-eighth of a drachm of the tincture. She could not have had the case more than five minutes before I discovered her, but in about two minutes she commenced vomiting. I immediately gave half a cup of coffee, and then went for some Camphor; returned in about five minutes. Her jaws were then rigid and nothing could be put in her mouth; pupils of the eyes widely dilated; face blue; hands and feet cold; no pulse could be found at the wrist. Bathed her bowels and back with Camphor for a few moments, when she went into a spasm, with violent shrieks; body bent backwards; arms rigid and thrown over her head; face dark blue; breathing suspended for several seconds; lasted about two minutes;

remained easier for a few moments, and then went into another spasm similar to the first. I then placed her in a tub of warm water, which soon relaxed the whole muscular system; vomiting kept up, with severe retching every few minutes for three hours, when it gradually subsided. The matter vomited was a white, ropy mucus. The interval between vomiting for three hours was not at any time longer than five minutes, and most of the time did not exceed one minute. She remained pulseless all the time, with a blue, hippocratic face; hands and feet shrivelled up, as if they had been in water for a long time. When she was not vomiting she lay in a stupor; pupils of the eyes widely dilated. After three hours the pulse could be counted; it was thirty-six; very feeble.

In three hours and a quarter after taking the Veratrum she went to sleep, and slept quietly and soundly for three hours, and then awoke well, except being a little weak.

The leading symptoms in this case were: Constant vomiting of a white, ropy fluid; dilatation of the pupils; comatose state of the brain; great congestion of blood to the lungs; blue, pinched up, hippocratic face, with cold nose, hands, and feet; spasms; trismus; no pulse for three hours; pulse 36, very weak and soft.

I would call especial attention to the spasms, and the effect it had on the brain and lungs. When I proved the Veratrum viride, one of the leading symptoms was, *constant aching pains in the back of the neck and shoulders*, so that it was almost impossible to hold the head up. I believe the Veratrum viride has a special affinity for the *cervical* portion of the spinal cord and base of the brain, but especially the *spinal cord*. The spasms my little girl had were in her thorax and back (Opisthotonos). The amount of medicine taken must have been small, probably only a few drops; the whole amount of medicine in the vial would have poisoned her fatally in a short time.

In Jones and Scudder's "Materia Medica" is the following case of poisoning:

Mr. Worthington took one-quarter of a grain of the alcoholic extract. It caused an acrid, burning sensation in the mouth, and communicated to the throat and fauces a sense of dryness and heat, which finally reached the stomach. In the course of an hour this dryness and burning sensation in the throat and stomach became intense, and a disposition to hiccough was excited, which soon commenced, gradually increasing in frequency until it reached fifteen or twenty times in the minute. This was attended with some sickness and retching, until vomiting took place. This was violent and seemed to come on about every ten or fifteen minutes for the space of an hour. During this time dizziness and tremor were created, which passed off with the dose. With the hiccough there was a copious secretion of saliva and discharge of mucus from the stomach and nose. During the action of this dose the pulse was weakened so as to be scarcely perceptible, and reduced from 68 to 52 pulsations per minute.

We have observed, says Dr. Scudder, similar symptoms, only more severe, in a case where half a fluid drachm of the tincture was taken by mistake instead of

Tincture of gelseminum. In this case the pulse was reduced from about 100 to 40 beats a minute. The prostration was extreme, and there was such great irritability of the stomach that it seemed for awhile that he must die from the impossibility of retaining the necessary stimulus. The fever did not return, though for some days the patient was much prostrated, the irritation of the stomach continuing for some time.

Another case of accidental poisoning has been reported to me:

The patient, a man aged thirty, was under treatment for pneumonia. By mistake seven or eight drops were taken every hour for four hours. About ten minutes after the last dose, great uneasiness appeared, followed in a few moments by intense pain in the stomach. This pain was of a drawing, twisting, passive character. The stomach felt as if drawn tightly against the spinal column, causing pain in the back in the dorsal region. There was at the same time drawing pain in the cervical region of the spine. The patient could not lie on the back, as it seemed to increase the pressure of the stomach upon the spine. This uneasiness and pain would culminate every five or ten minutes in a sudden, powerful, and expulsive vomiting, after which there would be a lull of a few moments in the pain. During the intensity of the pain there was great nervous sensitiveness. The least noise, as talking, walking across the floor, etc., would aggravate the pain intensely. The vomiting was not preceded by nausea, and was of mucus only. When the stomach had been emptied, there was excessive, painful, and ineffectual retching. The pain, vomiting, etc., reached its height in about one hour after the first onset, and subsided in about the same time, under the influence of Morphia. The fever, cough, and stricture of the chest seemed ameliorated after the effects of the Veratrum had subsided.

The above cases illustrate its toxical effects, and are at the same time partial provings.

We will now proceed to consider the general physiological action of Veratrum.

While accepting the results of the chemical analysis as undoubted, namely, that the alkaloid *Veratria** is found in both Veratrum *album* and Veratrum *viride*, I deny that their pathogenetic and curative action is *identical*. They are *similar* in *some* of their effects, and that is all. If you study the pathogenesis of the two species, side by side, you can readily point out the symptoms which are caused by the alkaloids and those which are caused by

* Veratrum viride is said to contain two alkaloids, *Veratroida* and *Virida*, and an *inert* (?) resin. The most ancient analysis of Veratrum album proves it to contain the same alkaloids, with an *active* resin, "very poisonous." This resin makes the Veratrum album the more powerful of the two.

other unknown constituents. I once wrote down, for my own satisfaction, the differential diagnosis of the two medicines, which I may present some other time. It is not as complete as Farrington's comparisons, but may be an aid to their selection.

Veratrum is primarily a *cerebro-spinal* and *cardiac-depressant.* It causes a profound paresis of the whole circulatory apparatus, and its ultimate primary effect is to cause an equally profound paralysis of the cerebro-spinal and reflex-motor nerve-centres.

The action of Veratrum viride can be stated in a few words, as follows:

1. *It acts on the heart in a manner the reverse of Digitalis.*

[It is a direct and primary poison to the cardiac ganglia and the heart-muscle. The heart after death is relaxed and full of coagulated blood.]

2. *Its action on the spinal cord is just the reverse of Strychnia.*

[It primarily paralyzes the spinal cord and the reflex-motor nerve-centres.]

Burt says: "Veratrum viride, by affecting the pneumogastric nerve (*vagus*), and by paralyzing its functions, produces congestion and inflammation in every organ and tissue to which it is distributed."

I deny that Veratrum viride causes inflammation by its primary effect. The only inflammation (primarily) caused by the drug, arises from its local irritating effect on the skin and mucous membranes of the œsophagus and stomach.

It is by its *secondary* effects that Veratrum causes the peculiar congestion and inflammation to which it is homœopathic. The *congestion* is an intense capillary hyperæmia. The *inflammation* is the result of pressure in and rupture of the capillaries, and is as much mechanical as dynamic. It is quite unlike the inflammation of Belladonna, Tartar emetic, Phosphorus, or Sanguinaria.

The first experiments of Wood and others shed some light on its action:

> The rapidity of the pulse and the arterial pressure were at first decidedly lessened. After a time, the pulse still remaining very slow, the individual heart-beats became endowed with four times their pristine force, and the arterial pressure became normal; *then, suddenly, the pulse-rate quintupled itself,* the individual cardiac beats losing much of their extraordinary vigor, *but the arterial pressure rising nearly fifty per cent.*

He explains this as due "to the asphyxia produced by the spinal action of the drug." I dissent from this view, and look upon this increase of the arterial pressure as a *secondary* effect of the drug; and during this secondary effect we get the *active congestion* and *first stage of inflammation.*

The recent experiments of Dr. H. C. Wood, published in the "Philadelphia Medical Times," throw more light on the action of Veratrum upon the heart and circulation than any previous investigations, and verify my opinion.

These experiments proved conclusively that the primary slowing and weakening of the heart's action was due to *stimulation of the par vagum* at its origin. This action on the inhibitory cardiac nerves differs from that of Aconite, which is believed to act on the peripheral cardiac branches.

Both act alike on the heart when out of the body, paralyzing it in diastole; but in the body the Veratrum paralyzes the heart by acting from the centre to the periphery through the pneumogastric; Aconite from the periphery to the centre.

The experiments made by Wood to decide the question whether the violent rise in the blood-pressure was due to asphyxia, resulted in proving that such was *not* the cause, but to a *paralysis of the par vagum.*

When the pneumogastric was cut, and Veratrum afterwards given, no slowing or weakening of the heart occurred.

When the Veratrum had been given, and the heart's action was growing slower and weaker, and the cardiometer recording a rapid decrease in blood-pressure, section of the pneumogastric immediately caused the heart's action to become quick and strong, and the pressure to increase rapidly.

This secondary action of Veratrum, after its primary depressing action on the heart, is due to paralysis of the pneumogastric.

Now this appears to me to be one of the most important discoveries ever made relating to the action of this drug. It is also important in its relations to the homœopathicity of Veratrum to fever.

If this secondary action did not occur, Veratrum would be *antipathic to fever*, and our claim for the universality of the homœopathic law would have to be abandoned.

That it is not a mere "reaction of the organism" is proved by the statement of Wood, based upon many experiments, that "*an excess of poison changed a condition of inhibitory excitation into one of inhibitory paralysis;* or, in other words, *whilst a small dose of Veratrum excites, a large one paralyzes the pneumogastrics.*"

This I have always believed to be the fact. I believe that all drugs capable of causing secondary symptoms have a similar *modus operandi*, and that in no case is there such a thing as a "simple reaction of the vital principle against the drug," but that primary and secondary action are both positive medicinal effects.

Burt and others are singularly oblivious of this secondary action when treating of Veratrum. To say that "congestion and inflammation is caused by Veratrum acting upon the pneumogastrics, in depressing their functions," is only stating half the truth. Moreover, it is doing injustice to the physicians of our school, for, at present, only a small portion accept the doctrine of primary and secondary action, and the law of dose based thereon.

Consequently, acting upon the bald, unqualified assertion that Veratrum causes inflammation of the brain, lungs, liver, and spinal meninges, they use the dose ordinarily used by them in practice. If this dose is below the 2x it will cure; if above (and nearly all would naturally use it above) no certain curative results are obtained, and the medicine is blamed as useless or inert.

During the primary effects of Veratrum no such conditions as above named could obtain. Congestion and inflammation cannot occur during a period of lowered blood-pressure; the only condition of the circulation then notable is that of venous stasis or passive engorgement.

We have no medicines whose primary action resembles the secondary of Aconite, Gelseminum, and Veratrum, unless it be Quinine. Therefore, we have no primarily indicated remedies for general sthenic fever, resulting in acute inflammation.

There are remedies which cause local inflammation, with resulting fever, as Cantharis, Belladonna, Mercury, Phosphorus, or Tartar emetic, but they are not indicated in idiopathic fevers.

Physiologically and pathologically, Quinine is primarily homœopathic to a general febrile state, with inflammation in every

organ and tissue of the body; yet it is never used by our school for such conditions. It acts on the brain and spinal cord in a manner very similar to Veratrum viride, only in a reverse order, *i. e.*, its primary toxic effects are like the secondary effects of Veratrum.

If any other proof is wanting of this secondary action, it will be found in the clinical results of the use of Veratrum viride, namely, that minute doses do not have any curative action over congestion or inflammation of an active, sthenic type.

In the lung-tissue examined by Professor Charles Adams, taken from animals poisoned by Veratrum viride, "the microscope revealed intense congestion and a large number of the capillary vessels ruptured." Burt says: "Sections of the lung were so completely hepatized, that when thrown into water they immediately sank to the bottom," and "the smallest air-cells were completely filled with mucus."

Now, no such congestion and inflammation could occur during the period of *decreased* arterial pressure (primary), consequently it must occur during the secondary action, described in Wood's experiments.

As I shall inform you, when treating of the use of Veratrum in pneumonia, it has been found that if large doses are given after the congestive stage, the latter stages are *prolonged.* This goes to prove that it is not secondarily homœopathic to any but the first stage. Why? Because, during the stage of red and gray hepatization, softening, and suppuration, the condition of the heart *simulates the primary action of Veratrum.* It is now known that death from pneumonia results ultimately from heart-failure.

What shall we deduce from these facts? This: that Veratrum, if used at all during the later stages of pneumonia or *any* inflammation, must be used in minute doses. I am not sure, however, that it should be used at all in such conditions. There is no clinical proof of its value there. Remedies which are secondarily homœopathic to cardiac debility must be chosen, namely, Phosphorus, Digitalis, or China (Quinine), aided by wine, beef tea, milk, and other nutritious substances.

Its *primary* action on the *brain* is to cause venous stagnation,

with lessened arterial pressure. It depresses the functions of the cerebellum, giving rise to abnormal movements, jactitations, clonic spasms, etc.

Its *secondary* action is intense arterial congestion. Dr. Adams's microscopical examination showed "intense capillary congestion of both the white fibrous structure and gray cineritious substance, there being more congestion of the cerebellum than the cerebrum." A *clot* was found at the origin of the pneumogastric, and effusion along its course. He also found great capillary congestion of the pons varolii.

According to Nothnagel, the "convulsive centre" is "located on the floor of the fourth ventricle, in the pons varolii." This illustrates why Veratrum viride, is so useful in convulsions of a congestive nature, and why it is only useful in material doses, *i. e.*, in the dilutions below the 2[x] and in small doses of the mother tincture.

H. C. Wood, in discussing this subject,* says:

> On account of the violence of the convulsions, it has been asserted that Viridia is a spinal excitant. The convulsions are, however, really of *brain*, and not of spinal origin, as they do not follow poisoning by Veratrum viride *when the cord had been previously cut.*

No record of the pathological appearances in the cord or its membranes, in cases of poisoning by Veratrum, are on record, so far as I know. It is highly probable that it causes the same condition in the cord and meninges that it causes in the brain and its meninges.

Clinical proof is also afforded in the case of Strychnia poisoning reported by Burt, in which the cure by Veratrum was prompt and decided.

I consider the Veratrum homœopathic to two kinds of spasms, namely:

(1st.) *Primarily*—to clonic spasms, general or local, *without* rigidity, with muscular weakness, weak pulse, etc.

(2d.) *Secondarily*—to tonic spasms, generally opisthotonic, or contractions of the lower limbs, always *with* rigidity.

For the former, doses not under the 3[x] should be prescribed;

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* Philadelphia Medical Times, vols. ii and iii.

for the latter, below the 3x, or even the mother tincture, in large doses.

Its action on the *nerves of sensation* is similar to that of Aconite and Veratrum album; yet there are points of difference worthy of being noticed. It does not actually produce anæsthesia, but allays pain and hyperæsthesia. When given in rheumatism and neuralgia the pain abates as soon as the system is under the influence of the medicine. An external application of the tincture to painful swellings, eruptions, etc., is said to mitigate the painful sensation.

Its action on the *nerves of motion* is very decided. "We have observed," says Coe, "as a result of the administration of Veratria, very singular contortions of the muscular system, particularly of the muscles of the face, neck, fingers, and toes. The head would be drawn to one side, the mouth drawn down at one corner, and the facial muscles affected with convulsive twitchings. At times these contortions would take the form of tonic spasms; while at other times the action would simulate a series of galvanic shocks, frequently of such violence as to precipitate the patient out of bed; during all this time the intellect of the patient remained undisturbed, and he was conscious of all that was going on."* It would certainly seem that the Veratrum was homœopathic to cholera in some of its forms. It seems to exert primarily a *sedative* influence over the nerves, as specifically as Nux vomica and its analogues *irritate* them. Its primary action is the opposite of the primary action of Strychnine. It is homœopathic to very many convulsive affections. As a prompt and reliable remedy I prefer it to Aconite in hysterical, epileptiform, or puerperal convulsions; also in the convulsions of children. I have succeeded with the first decimal dilution, rarely having to resort to the mother tincture, and then only giving it in one and two drop doses. The following allopathic experience with the Veratrum viride in nervous and spasmodic affections is worthy of place here. It is stated that animals poisoned with the Veratria from Veratrum viride "*lost the power over the locomotive muscles*, and after death the galvanic current did not cause the same convulsive movements as in cases of

* Coe's Concentrated Organic Medicines.

death from other causes."* Experimenters all notice a peculiar "weakness and inability to move the muscles;" also, stiffness of the voluntary muscles. In Dr. Burt's cases it caused *trismus, opisthotonos*, and other spasmodic symptoms.

Dr. Baker, in the "Southern Medical and Surgical Journal," gives an account of the value of the drug in the treatment of certain neuroses.

CASE I.—The patient was a stout, healthy man, of sober habits. I found him sitting on the side of the bed, seemingly well and perfectly intelligent, unaware, however, that he had had convulsions. All that I could ascertain of his previous history was, that he had been similarly affected in childhood. While conversing with him he was suddenly, and without apparent premonition, seized with a frightful convulsion, occasioning frothing at the mouth and the most violent jactitations of all the voluntary muscles. I immediately opened a vein and bled him profusely, but without the desired result, for, after the lapse of a certain period, with as perfect a return of consciousness as before, there occurred another convulsion of equal severity. In this emergency, the excessive muscular relaxation capable of being produced by the Veratrum viride occurred to my mind, and I reflected that such an effect could only be produced by an influence primarily exerted upon the cerebro-spinal system of voluntary nerves. I administered the Veratrum in full and repeated doses, desiring and confidently expecting to produce the same train of distressing symptoms that so alarmed me some years previously; these were nausea, vomiting, purging (rarely observed), *muscular relaxation*, and coldness of the surface. In this I was disappointed; for, though the *convulsions were arrested*, there occurred no other symptom than a relaxed skin, with profuse perspiration. Since then I have administered the Veratrum in numerous cases of eclampsia of children, with such satisfactory results as to establish, beyond all doubt, the power of this agent to arrest convulsions.

In this case the cure was as certainly homœopathic as if made with the third dilution.

Dr. Baker, in June, 1858, undertook the cure of a case of *chorea* in a young lady. It had been gradually coming on for two months:

When first visited her symptoms were distressing to the last degree, the entire muscular system being in continuous and tumultuous motion. The case passed on from bad to worse, notwithstanding the most assiduous attention and energetic treatment. Tonics, antispasmodics and anodynes were exhausted without avail; the spine and nucha were cupped and blistered without benefit, Chloroform was administered internally and by inhalation, Opium and its preparations seemed to

* American Medical Times.

make her worse; so, after all the family had given up all expectation of recovery, upon the suggestion of a medical friend, who had twice used the Veratrum viride in three cases of chorea with the most satisfactory results, he at once commenced its administration, and as she was gradually brought under its influence the turmoil began to cease; the face, which had been worked by its muscles into the most ludicrous and horrible distortion, became placid and intelligent; the head ceased its everlasting jerking, the extremities lay still, the body left off writhing, and the patient quietly passed into a peaceful and profound slumber. This sleep was deep and long, as it was the first, with few and slight exceptions, that she had had in nearly two weeks; and the quiet that the muscles now received was all that had occurred, save during those few and short slumbers. At a subsequent visit I found the family cheerful and hopeful, and the patient quiet and sleeping, the pulse but little depressed. There had occurred no vomiting. I roused her, and, to my great satisfaction, when awake, there was no jactitation of the extremities, and but very little twitching of the muscles of the face. The Veratrum was continued; and for the first few days, if withheld, the commotion began to return. Under the quiet induced the sleep was so continuous at the outset, that the family called the preparation "the laudanum mixture." After a time the convulsions ceased altogether, and the patient was restored to health under a course of tonics.

Dr. Terry reports three cases of *chorea* in which the Veratrum viride was employed:

CASE I was a child aged twelve. It had been confined to bed for three weeks, and was reported to have been under treatment for about six weeks; first, for worms, with Spigelia, Wormseed, etc.; and subsequently for chorea, with Cimicifuga racemosa, Iron, Quinine, and the usual routine treatment, until the child was apparently dying. It is not in the power of language to convey a proper conception of the truly pitiable state in which I found this child. It had slept none, neither taken any nourishment for days. It was evidently dying from exhaustion and inanition. The muscular commotion was violent, universal, and unaffected by sleep; the lips embossed with foam, worked up by a continued champing of the teeth. Three drops of the Tincture of veratrum viride were administered every three hours, the vehicle being gum-water. In twenty-four hours I had the gratification to see the symptoms greatly improved; the muscles were much quieter, and the child could swallow without difficulty. The trouble in this respect had constituted the greatest embarrassment in the treatment. At the end of the fourth day all convulsive action had ceased.

CASE II was an ordinary one, in a girl of fifteen. After purging, four drops of the Veratrum viride were given every three hours. Prompt convalescence ensued.

CASE III.—A woman, aged thirty-six, childless, and subject to menorrhagia, immediately after an attack of which she had a continual nodding of the head and violent convulsive action in one arm, together with jactitation of one leg. In this case six drops of Tincture of veratrum viride were given every three hours. The fourth dose occasioned slight nausea, and after the fifth dose the

convulsive action ceased, when the Veratrum was withheld. In eight or ten hours the symptoms returned. Upon resuming the medicine they again disappeared. The doses were then reduced. The case recovered.

Dr. S. W. Green, of Manchester, Iowa, in a letter to Dr. Burt, relates a case of *chorea* in which the use of Veratrum was very satisfactory:

A lady, married, about thirty years of age, nervous temperament, quite intelligent, and under easy circumstances. She has had chorea more or less from childhood up, and has been worse ever since the age of puberty, which, as near as I can learn, is in consequence of continued, intense sexual excitement, and after marriage too. She had always had homœopathic treatment, but with little benefit, until I gave her Veratrum viride, which has been permanent. She had constant movement of the head, lower maxillary, larynx, and tongue; twitching and light jactitation of the muscles of the neck, organs of speech, and face; so much so that it required considerable effort often to converse; constant movement, and sometimes slight jerking of the chest, arms, fingers, and lower extremities; sometimes there would be one slight jerk of single muscles in different parts of the body. But now comes the singularity of the case. The symptoms gradually subsided, and to all appearance she was well for several months, when all at once she was taken with violent palpitation of the heart. I was called in, and found her laboring under symptoms caused by the lungs and brain receiving far more blood than was compatible with their normal condition. Her heart was beating more than 160 beats per minute. I gave her Veratrum viride, first decimal trituration, which reduced the heart to its normal action in twelve hours. There has been, once or twice since, a slight recurrence, which was speedily relieved by the same remedy. The case would seem to imply some influence upon the superior cervical ganglion.

The allopathic journals abound in reports (since 1870) of grave cases of puerperal spasms cured by Veratrum, given in ten to thirty drop doses of the tincture.

Dr. Baker also mentions a case of *puerperal convulsions*, in which Chloroform by inhalation, copious bleeding, and forceps were employed; the child dead; weighed eleven and a half pounds. Patient was left quiet and comfortable. Seen after four or five hours had elapsed. She was found in a most violent convulsion, which was said to be the seventh since delivery. Fifteen drops of the Tincture of veratrum viride were given, and ten more were directed to be given in two hours, after which the intervals should be prolonged to three or four hours. *There occurred no more convulsions*, and the woman recovered perfectly. She was not even nauseated, though the medicine was given at regular intervals during the whole night.

Dr. Woodward, of Galesburg, Ill., writes in the Philadelphia "Medical and Surgical Reporter:"

In a late case of puerperal convulsions I did not resort to the Veratrum, but used the lancet twice, taking away forty-five ounces of blood before the convulsions ceased; but in about four hours after the last convulsion the lady became furiously delirious, requiring to be held on the bed. Two doses, of ten drops each, of Tincture of veratrum viride quieted her so completely that she slept for four hours, and had no return of the delirium.

Since my second edition of "New Remedies" I have treated many cases of *puerperal convulsions* with this drug, and it has not failed to arrest them in a single case. In all the pulse was *very full and hard*, and the cerebral congestion was very marked.

In that fearful disease, *cerebro-spinal meningitis*, the Veratrum viride would appear to be a valuable remedy.

Dr. C. A. Williams, of Joliet, Ill., reports the following case, presenting tetanic symptoms, but which closely resembles an attack of cerebro-spinal meningitis:

I was called one night to see a child about four years old, and found her suffering from an attack of pneumonia. The febrile action, which was excessive, accompanied with some delirium, I succeeded in reducing with the usual remedies, and with good results, as in the morning I found her quite comfortable, with the exception of a severe cough; the skin was moist, the pulse about natural, and all the symptoms denoting a decided check to the disease, which was so alarming the night previous. This condition continued until evening, when the febrile symptoms came on again, with considerable pain in the stomach and bowels. Bowels tympanitic and very sensitive to touch. Ordered an injection, but got no relief from a very copious one; then gave Olive oil and Podophyllum, and in a few hours got a good evacuation and the removal of the tympanitis; bowels still sensitive. In the morning bowels still sensitive, pulse quick and wiry, pupils dilated, and the muscles of the back of neck contracted, drawing the head back on the shoulders. Considerable delirium; cough dry and spasmodic; gave Aconite, Bryonia, and Hyoscyamus. In the evening the symptoms were increased; the tetanus still continued, extending to the trunk. At about 12 o'clock she had a convulsion or a clonic spasm, drawing the head almost to the heels. These spasms continued as often as once in five, ten, or fifteen minutes, without any relaxation of the muscles of the back for five days, when, after using all remedies recommended by the authors, and finding the patient almost gone, I asked for counsel, and Dr. Fowle was called. He advised emesis and injections, but with no effect, with the exception of some nausea. The sixth day of convulsions we used Chloroform, but got no effect. Dr. Wood came in, and the decision of all was that she must die. During this time the pupils continued dilated, bearing the strongest light without changing. It was a complete case of opisthotonos, like that produced on the dog by Gelseminum. Not having any Gelseminum I did not give it. During the spasm the heels almost touched the head, forming a hoop of the body.

From the third to the fifth day the body was covered most of the time with a cold, clammy sweat. On the fifth day there was a marked febrile action; came on about noon, and went off in the evening. The sixth, seventh, and eighth days it was the same, when I concluded to put her on Veratrum viride. Accordingly, about two o'clock in the afternoon, commenced with half-drop doses every hour; continued this course until twelve o'clock, when there was some nausea. On a close examination found that the muscles were somewhat relaxed; continued the Veratrum viride until morning, when there being no fever I stopped it. I found then, however, that the muscles of the trunk were completely relaxed and the spasms ceased. In the afternoon there had occurred no return of fever, but the muscles of the neck still continued contracted; pupils were natural, but very sensitive to light. I again gave the Veratrum viride, as before, and to my joy the next day found her able to lie on either side or back. Improvement went on from this time. I gave her Nux vomica and other medicines, and in two weeks discharged her. We had supposed that the opisthotonos was produced by an irritation of the stomach and bowels, and thus acting sympathetically on the spinal cord and base of the brain, but I have found out since that she had a fall, striking the lumbar vertebræ against the corner of a trunk, three days before she was taken sick. Now, then, what action has the Veratrum viride on the spinal cord or brain?

Dr. M. A. Tinker, of Schenectady, New York, reports a number of cases of cerebro-spinal disease, in which the administration of Veratrum was followed by the most gratifying results. These cases are so suggestive and interesting that I give them in full:

CASE I.—The patient, my son, now (Dec. 1st) fifteen months old, of a nervo-sanguine temperament, light complexion and hair, fair, clear skin, blue eyes, fully developed, and healthy previous to the 1st of June, when he had the measles rather mildly and made a good convalescence. On the 5th of July he was taken with scarlatina; had it very mild and made a rapid recovery, to all appearances.

On the 28th of July he became feverish and restless, and gave evident signs of irritation of the brain.

On the 29th much worse; burning fever; frequent vomiting; tongue coated whitish; bowels sluggish; urine high-colored, of usual quantity; very restless, and sleeps or nurses but little; cries out on attempting to move him; irritation extending down the spine, and both ears discharging a thick, excoriating fluid.

30th.—Every symptom aggravated in spite of Aconite, Belladonna, Bryonia, Pulsatilla, Gelseminum, etc.; worries, with a peculiar moan, most of the time; draws the head backwards; rolls up the eyes; puts his hands back of his ears and rolls the head from side to side; pulse about 150; respiration rather hurried.

31st.—Continues to grow worse; head buried deeply in the pillow; eyeballs still turned upwards; other head symptoms about the same, only increased in violence; bowels and urine as last reported; discharge from the ears has become purulent and more abundant; cannot bear to be moved at all. The pulse, to

wards evening, began to flag in strength, and at times amounts to little more than a flutter, and then the face and front of the body and extremities are quite pale and covered with a cold perspiration; on examination I found a strip about six inches wide, extending from the crown of the head to the bottom of the spine, very pungently hot and dry, reddish in appearance, with several large and small petechia—like mosquito-bites—scattered over this inflamed strip.

August 1st.—Child very low; the pulse at times scarcely perceptible; the case passed this day very much as he appeared last night, as reported.

August 2d.—Appears to be gradually sinking; do not think that he can survive the day; no alteration whatever for the better, and cannot be moved at all; the spinal muscles are very strongly contracted. At about 1 o'clock P.M., I again took up your "New Provings" to see if something more could not be done. On examining Veratrum viride, a single remark there determined me to try the remedy at once. (Clinical remarks under Head.) He had cut his front teeth the week before he was taken sick; there was no apparent irritation here. I at once prepared a solution, four drops of fluid extract in half a tumbler of water, and gave a teaspoonful every hour. In two hours the pulse began to steady, and there was less restlessness. At 6 P.M. (five hours) improvement began to be quite evident, and he slept about twenty minutes quietly. At 9 P.M. nurses; can be moved, and turns his head; the head and spine cool and perspiring freely. At 12 M. is sleeping; hands away from the head; lies naturally on the pillow, and in a free, general perspiration.

August 3d.—Appears like another child entirely; the bowels regular from the first, and at the second movement quite natural in appearance; urine normal also; tongue cleaning, and pulse 121.

August 4th.—Child slept very well last night, and the natural functions are all becoming regular. From this he made a very rapid convalescence. I changed the medicine once, but restlessness and head symptoms showed themselves. On returning to the Veratrum viride all subsided.

On the 5th of September, long after we had stopped all medication, the child manifested strong cerebro-spinal symptoms again, with high fever, loss of appetite, etc., as before. I gave Aconite and Belladonna, to no purpose. When I had dropped all, and had recourse to Veratrum viride, same strength as before, in ten hours all was right, and the child playing about the floor. This child has had two similar attacks since, both of which readily yielded to the Veratrum.

CASE II.—September 7th was called to see a child aged three months, the first born alive of several pregnancies, and had suffered much from its birth; of scrofulous parentage. I found the child emaciated to a mere skin-covered skeleton, with the head much enlarged and misshapen, and the sutures separated; head was drawn back as far as possible. The child also had double inguinal hernia; the pulse about 160 and feeble; respiration feeble and sighing; tongue coated whitish-yellow; posterior portion of head and spine very hot; there was so much contraction of the spinal muscles that the child was compelled to lie on his side; the eyes rolled upward; rolling the head, and by turns moaning and screaming; most of the time nursed but little. He had a watery diarrhœa, mixed with white and green portions of undigested milk, and at times the discharges were quite green; the urine scanty and high-colored. This state of things had

existed for some time, as the child had been abandoned by two attending physicians to die. I at once concluded to try Veratrum viride, four drops to a half tumbler of water, and had the pleasure of seeing my little patient amending daily, to the great delight of the parents, and in less than one week the child could lie on his back with ease; the more alarming symptoms all disappeared, and in the course of three weeks the child had improved so much that his mother said, "a very worrisome child has become a very good baby." I called to see the child but a day or two since, and found a very healthy, fleshy-looking fellow.

I have had two other cases, similar as to symptoms, but not in severity, to those above reported, both of which recovered rapidly under the use of Veratrum viride.

CASE III.—A boy, aged four and a half years, had for several days a croupy cough, and at night considerable fever. The cough yielded to Phosphorus, but the feverish state increased until it became nearly or quite a continuous one; tongue coated white; urine scanty and bowels irregular, and pulse 160 to 170. About six days after the attack he had in the evening a very violent convulsion, which lasted about fifteen minutes, and considerable insensibility for an hour afterwards; after this had passed off mostly, the fever began to increase very rapidly, and in four hours the pulse ran into a flutter, and the respiration had increased to 76 per minute. I determined to try Veratrum viride, which I prepared at the rate of six drops fluid extract to one-half tumbler of water, repeated every hour, one teaspoonful; in three hours he was asleep, and in the morning quite comfortable, and wanted to eat. Continued the medicine from one to three hours during the two following days, and has had no fever since the night in which he had the convulsion, which was decidedly epileptiform. He has made a good convalescence and is now quite well.

The particular symptoms relieved by the Veratrum viride in all the cases reported by me were of a cerebro-spinal character. In some cases, hydrocephalic symptoms were present and had existed for some time. I have no doubt of its relieving the same symptoms, arising in connection with all other diseases, that affect spinal or cerebral, or both classes of nerves combined, which we so often meet with in warm weather.

The cases reported were from children of very large active brains.

I have used the Veratrum alone in congestion and inflammation of the lungs with very general satisfaction, my patients making speedy recoveries. I hold that in lung irritation the spinal nerves are very extensively implicated, and by using this cerebro-spinal sedative the irritation at once begins to subside, and soon all danger is past. I have the most unlimited confidence in the use of this remedy in all diseases where the spinal nerves, as well as cerebral, are concerned.

I have just relieved a case of this kind—a case of scarlatina. I tried it as an experiment, and found in a few hours these peculiar symptoms all gone and fast disappearing.

I have found Veratrum viride to act almost specifically in cases of convulsions in which there is a tendency to opisthotonos; and the more strongly marked this symptom the more decidedly is this remedy indicated, and the more obvious its action, whether convulsions are present or not. In one case recently I produced a well-marked proving of this, and in another a very striking aggravation, even with my usual dose, four drops tincture to half a goblet of water.

Mrs. C., aged eighty-five, nervous temperament, been a sufferer for years with cataleptic spasms of the opisthotonic variety; was relieved in a few hours of severe spasms, and has had no return for some weeks; continued the Veratrum viride once or twice a week. Considers herself cured.

Four other physicians to whom I mentioned the action of this remedy have used it and report the results very satisfactory, confirmatory of my previous statements.

I here present Dr. Burt's case of Strychnia poisoning which I have referred to:

Two years ago I was called to a most heartrending case of *poisoning by Strychnia* in a noble little boy of six years of age. An old-school physician had prescribed Strychnia sugar-coated pills, each containing one thirty-second of a grain, to the boy's uncle, for ague. How many he ate we never could learn. When I reached him he had been in spasms two hours; the least touch of his body, the noise made in shutting the door, or the movement of his body, would bring on the most frightful spasms, lasting from one to five minutes; his arms and legs were rigid; the muscles of the chest so rigid that respiration would cease; face livid, and bloody saliva running from his mouth. I immediately gave him nearly one teaspoonful of the fluid extract of Veratrum viride, and then two drops every ten minutes. He had nine spasms the first hour, the second but two, which were the last. The Veratrum had completely relaxed his muscular system, so that he could hardly move a limb. The third day he was up and playing about the house. The wonderful action of the Veratrum in subduing those fearful tetanic spasms, caused by Strychnia, gave me more confidence in the remedy than I can express.

The sleep-symptoms of Veratrum are quite commonly experienced in cerebral congestions. In the incipient stages of meningitis, or hydrocephalus, dreams of being on the water are not unusual. Dr. Coe says it is a "soporific," but decrees that it is *not* a narcotic. Drs. Tully and Ives proved to their own satisfaction that it was possessed of narcotic properties.

The Veratrum viride belongs to the group of remedies of which Aconite, Veratrum album, Gelseminum sempervirens, etc., are members. The primary action of all these remedies, when given in medicinal doses, is to *depress* the circulation through the nervous system. With this depression there is always present coldness or coolness of the skin, warm or cold perspiration, chilliness or coldness, and, in short, all the symptoms which generally characterize the *cold* stage of fevers. I have not been able to find, in any of the cases of poisoning by Veratrum viride, any general reaction

following this cold stage. The same may be said of the other members of this group. It is only in careful and exhaustive provings, with small and repeated doses, that we get continuous febrile symptoms. But we may properly accept this statement, namely, that it is with medicinal as with natural diseases a fact that a febrile reaction always follows the cold stage, if the vital powers do not prevent. Any *cause* capable of depressing the nervous and vascular system (primarily) will cause excitation and irritation of the same system (secondarily). The secondary (reactive) symptoms will vary in nature, symptoms, and intensity with the cause. Thus, the secondary febrile symptoms following the primary febrile symptoms of Aconite are very different from those of Gelseminum or Veratrum.

In *fevers* in general, Veratrum viride enjoys the confidence of a great portion of the allopathic and eclectic schools of medicine; but, like all other powerful medicines, it has its enthusiastic adherents and its bitter opposers. Some very high authorities are extravagant in their laudations of its safety, efficiency, and curative power over many diseases besides fevers; at the same time, other authorities, equally high, denounce it as a dangerous drug. Professor Lee says:

> The same objections will apply to it as has been brought against Aconite, namely, the difficulty of regulating its effect, and its dangerously depressing effects, *even in small doses.* From what we have seen and know of its use, we have little doubt that it has *caused more deaths in one year than Chloroform has since its discovery.*

I am sorry, for the sake of humanity, that I can agree with Professor Lee in his estimate of its danger, *but only when used in the recklessly large doses* of his school. Aconite, Tartar emetic, and Mercury are equally dangerous and fatal when used by the dominant school, yet in the hands of the homœopathist these poisonous agents become potent instruments for the removal of disease. He regulates the dose to suit the oversensitive, diseased organism, and the result is that Veratrum viride, as well as Veratrum album, Aconite, Tartar emetic, Gelseminum, and others, become invaluable to suffering humanity.

In simple *ephemeral* fever, without local inflammation, but ac-

companied by vertigo, headache, dimness of sight, nausea, weakness, and restlessness, this remedy is as useful as any. (Drop doses of the 1st decimal dilution.)

In *irritative fever* it may sometimes be of great utility. In this disease the pulse often runs as high as 140, or even 160. It differs not less in strength and fulness than in frequency. Sometimes it is strong, full, and moderately accelerated, and sometimes small and feeble; and the latter is most apt to be the case when the frequency is the greatest. When the fever is accompanied with a tendency to drowsiness, throbbing of the temporal arteries, a full, frequent, hard pulse, vomiting of mucus and bile, constipation, tendency to spasms (as is frequently the case in the *infantile remittent* of children), the Veratrum viride, in suitable doses, will soon effect a favorable change. To a person over ten years may be given five or ten drops of the first decimal dilution, every hour or two; to children, from *one* drop to five drops will suffice, although in cases of cerebral congestion large doses may be used. When this fever is caused by teething; the irritation of worms, or any cause acting through the nervous system, this remedy is the best we can use. As stated above, the pulse is often quick, febrile, and very feeble. This may arise from an affection of the nervous centres, and the pulse may be the pulse of oppression and of weakness. In the former case Veratrum viride, in the doses above mentioned, will often cause the pulse to become less frequent, fuller, and softer. When debility is the cause of the small pulse, Phosphoric acid and China are indicated.

Dr. Neidhard writes:

> The Veratrum viride tincture cured the following symptoms in a boy aged twelve: *Headache*, with afternoon fever; dry skin; tongue coated thickly yellow; very thirsty; vomiting of bile; no appetite; constipation.

Intermittent fever is not controlled by any remedy of the Aconite group. They do not seem to possess the antiperiodic power which is essential. I cannot subscribe to the doctrine taught in our school, that "any medicine will cure ague if indicated by the symptoms." I practiced in a malarious district over twelve years, and my experience in the treatment of miasmatic fevers led me to adopt this conclusion, namely, that there is a certain class of remedies

which possess *antidotal* virtues, or are capable, when introduced into the system, of antidoting the malarious poison. I believe this poison to be a specific miasm, and not a mere "correlated force," as some teach. Not all intermittents are due to the action of this poison, and some such fevers may be cured by others than members of the *China* group, namely, Quinine, Nux vomica, Arsenicum, Salicin, Cornus, Eucalyptus. Veratrum viride, although not indicated for the disease itself, is often of great use in the hot stage, when the action is intense and the vascular system is excited strongly. In such cases, in adults, we may have congestion of the brain, delirium, powerful action of the heart, and a hard, rapid pulse, and in children severe spasms and convulsions. In these cases this remedy is superior to Aconite or Belladonna. Under its use the intensity of the paroxysm will soon subside, and the threatened convulsions be arrested. I have sometimes given one or two drops of the mother tincture, every half hour, to an adult, and half as much to a child, with the happiest results.

Remittent or *bilious fever*, when not dependent on miasmatic influences, will often be amenable to the therapeutic influence of Veratrum viride, but will have to be alternated with other remedies, like Bryonia, Mercurius, Podophyllum, or Leptandra, as the symptoms and conditions demand. When the gastric symptoms are predominant this remedy will have to be used in smaller doses (2d or 3d dilution) than when the stomach and bowels are irritated. When this form of fever assumes the character of a *pernicious* remittent, the Veratrum viride must be used with extreme caution. It is still indicated, but *primarily*, for the primary action of the drug is to cause conditions very similar to a pernicious fever, namely, a prostration of the vital forces, with typhus symptoms, etc. My experience in such fevers has taught me that the best and safest treatment is to use Baptisia, Veratrum viride, Aconite, or Veratrum album 3d, in alternation with a remedy secondarily indicated, namely, China, Quinine, Nitric acid, etc., in material doses. Indeed, it is often necessary in those low conditions which occur during pernicious fevers to give Quinine in five or ten grain doses, repeated, in brandy, every hour. Those who have had to combat these terrible malarious diseases will know and appreciate the necessity of resorting, in

some cases, to such doses; and those who know the least, practically, of these diseases, are they who are loudest in denouncing what they term "gross medication."

In *yellow fever* the Veratrum has been used by the allopathic school with alleged success. Drs. White and Ford, of Charleston, S. C., treated many cases with Veratrum viride. In the Charleston "Medical Journal and Review" they give the results of their treatment. They gave from eight to ten drops to adults, and from one to six drops to children, repeated every hour or two:

By the administration of the Veratrum in this manner the pulse was sooner or later subdued, and as it sank became somewhat irregular. The first doses were often vomited, in severe cases, but the succeeding ones were commonly retained, and the patient did not vomit again until the pulse was reduced, when the effect of the remedy was occasionally marked by emesis. This vomiting was rarely severe, ceasing of itself upon a temporary discontinuance of the medicine, or yielding readily to common restoratives. The reduction of the pulse was accompanied by notable cooling of the body, by a well-marked diminution of the headaches, pain in the back and limbs, of the restlessness and anxiety, of the frequency of the respiration, of the congestion of the skin, flushing of the face, tumefaction of the tongue, and injection of the conjunctiva. The patient felt much relieved and slept tranquilly as soon as the vomiting had ceased; nor would the symptoms tend to recur for some hours, as they would always do, however, if the drug were not again prescribed. The pulse kept by the Veratrum beats fifteen below the normal range. If the pulse was small and frequent, it was given in small doses; if black vomit supervened and the pulse was slow, the Veratrum plainly was not required; if, however, the pulse was rapid, the Veratrum was continued in doses proportioned to its frequency, which were usually small and repeated every two or three hours. Without regard, therefore, to the ordinary accidents of the disease, whenever it was required, and only then, the Veratrum was uniformly or specially administered, until convalescence was declared. Together with the Veratrum, however, Mercury was given, pushed to salivation and catharsis; also saline, diuretic, and refrigerant mixtures; so that the results are anything but satisfactory to the investigator who would ascertain the pure effects of drugs in disease. Of the whole number treated with Veratrum, namely, 117, there recovered 102, died 15. Adults 80, recovered 66, died 14. Children 37, recovered 36, died 1. The subjoined table shows the mean range of the pulse under the Veratrum viride, as compared with its mean range before the Veratrum was given:

Mean frequency.	Adult Males.	Adult Females.	Children.
When Veratrum v. was first given,	102.5	114.2	137.5
Seven hours after, ...	61.3	65.2	71.0
Remainder of disease, ...	52.8	64.7	74.8

This table shows the power which the medicine exercises over the pulse and the heart's action *in disease*, and by it we can judge pretty correctly of its action on the healthy organism.

In *typhoid fever* the Veratrum viride has not been used much in homœopathic practice; not as much as, in our opinion, it is entitled to. Many of its symptoms strongly resemble the symptoms of typhoid, particularly the abdominal and cerebral varieties. The only cure on record in our literature, illustrating the action of this remedy in typhoid fever, is reported in the Philadelphia "Journal of Homœopathy," by Dr. Henry. He says:

It is the best remedy I have ever used in the treatment of those diseases which have a tendency to assume a typhoid form of fever. As far as I have been able to test this remedy in fever of all descriptions, I must say I am better pleased with it than with Aconite.

CASE I.—A little girl, aged thirteen, had been suffering with continued fever for ten days. She complained of violent pains in the back; inclined to sleep most of the day; very sick at the stomach, but not so as to produce vomiting; black diarrhœa; pulse varying from ninety-eight to one hundred and ten during the day; pain and weakness in the lower limbs. I took the case to be a mild form of typhus. I immediately put five drops of the mother tincture in a tumbler half full of water, and ordered a teaspoonful to be taken every half hour, until perspiration was produced. I called in two hours, found the pulse down to 84; the patient was in a general perspiration; she recovered without any other remedy in two days.

CASE II.—Mr. H., a young man, aged eighteen, sick two weeks. Found him with a very high fever; pulse 120; face very much flushed; fulness, with slight pain, and great buzzing in the head; gnats and bugs fly before the eyes; inclined to jump out of bed; talking at random; slight bearing-down pains in the bowels, attended with black diarrhœa; great weakness of the lower extremities, with general prostration. Six drops of the mother tincture of Veratrum viride were mixed with twelve teaspoonfuls of water, a teaspoonful to be taken every half hour. In three hours found the pulse down to 95; before the day was out he was in a fine perspiration; no fever for three days; has now a slight fever, which lasts two or three hours a day; every other symptom right.

There is no question in my mind but that a continuance of the pathogenetic action of Veratrum viride would result in such lesions of the intestinal canal as results in the typhus process. Rubbed on the skin or held in the mouth it causes erosions and vesicular eruptions, and it will probably affect similarly the whole intestinal tract. I regard it as secondarily indicated in all fevers of the synochal or inflammatory type, and even

in some typhoids. The above cases have many symptoms which resemble those caused by Veratrum viride; but Baptisia, Belladonna, Phosphoric acid, and Muriatic acid are more generally indicated.

I do not consider my duty to my colleagues properly performed did I not give allopathic testimony as regards the use of this medicine in typhoids. A little truth may be gleaned from the chaff by careful winnowing.

Dr. Staples (allopath), of Dubuque, Iowa, says:

Veratrum viride has been condemned in some of our Eastern hospitals in asthenic cases attended with much prostration. For instance, typhoid fever, on the ground "that we have already a weak, feeble pulse, and the Veratrum would only make it weaker." Now, any observer who has carefully observed the action of Veratrum viride, has observed that the pulse, as it was reduced in frequency, became fuller and stronger, while the fact that it causes nervous sedation should not be lost sight of. It should also be borne in mind that the views of modern investigators in reference to the agency of the nervous system in pathology and therapeutics, essentially modify the treatment of disease. It is a fact well known to pathologists that similar phenomena often attend totally opposite conditions of the brain, for which no satisfactory explanation can be given. There are functional derangements, watchfulness, etc., attendant upon superexcitation of the brain, while the debility and depression of the nervous system, which explode into delirium tremens, are followed by kindred phenomena. But in either case the continuance of the disturbance enhances the primary affection, and by so much removes the system from convalescence. Take, now, typhoid fever. True, there is a rapid, feeble pulse, but the very excitation and irritation which grow out of cerebro-spinal debility and increased vascular action perpetuate the disturbances, augment the very debility, and wear out the system by excessive friction. In this condition the secretions are locked up, the brain is oppressed, the heart and lungs are laboring to free themselves from the tension to which they were subjected. Now here is a condition in which remedies cannot act. But if we can subdue this nervous exaltation, the system becomes relaxed, the secretions are restored, the circulation and respiration become slower, fuller, and stronger, the lungs oxygenate the blood more completely, and nutrition and depuration, which had been before impossible, are allowed to go on. I have seen typhoidal cases where the morbid action had continued for weeks, with the pulse from 110 to 130, speedily convalesce on reducing the cardiac pulsations by Veratrum viride to 70 or 80 per minute.

Dr. S. submits the following hypothesis of the action of Veratrum viride, under which it may be serviceable in cases of debility, under certain restrictions, and at the same time valuable as an antiphlogistic:

The administration of Veratrum viride, carried to a limited extent, allays, by its action upon the cerebro-spinal system, nervous and circulatory excitability, and places the system in a favorable condition for recuperation; another degree produces profounder impressions by attacking the sympathetic system, which presides over secretion and nutrition, inducing sedation and constitutional depression, evinced by the rapid waste, emesis, diuresis, and diaphoresis.

The testimony of the eclectic and allopathic schools as to its usefulness in low forms of fever is about equally divided. In small doses, in the dilutions, it will undoubtedly prove useful in typhoid and other low fevers, if homœopathic to the symptoms and conditions.

Finally, besides the above general indications for the use of Veratrum viride in *fevers*, there are two characteristic symptoms which should always be present:

(1.) *A very hard, full, quick, bounding pulse.* (Aconite has small, *very* quick, hard, *sharp* pulse; Gelseminum, a quick, full, large, but *soft* pulse; Baptisia, a quick, full, bounding, but easily *suppressed* pulse.)

(2.) *A tongue yellow at the sides (edges) with a red streak,* wide or narrow, in the middle. (Aconite, yellow, or white all over; Gelseminum, pale red or yellowish-white; Baptisia, dark red or brown.)

On the *muscular* and *fibrous tissues* the Veratrum viride has an undoubted and perhaps direct effect, similar perhaps to Bryonia, Belladonna, Colchicum, Cimicifuga, etc.

In some clinical remarks upon the Veratrum viride the late Dr. J. C. Peterson reported the cases below, illustrating its action in *rheumatism:*

Case I.—Mr. S., aged thirty-seven, sanguine, nervous temperament, was attacked with violent rheumatic pains in the left pectoral region, and elbow of the same side. The pain was so severe that he was delirious. I gave him Veratrum viride 1st, one drop every fifteen minutes; perfect relief followed the exhibition of this drug within an hour. He fell asleep and perspired profusely. Although of a decided rheumatic diathesis he has had no return of a similar attack.

Case II.—Master F., eleven years of age, was attacked with violent inflammatory rheumatism of the left knee. The part was much swollen, but not discolored; impossible to move the limb on account of the agony it produced. Gave Veratrum viride tincture, one drop every half hour until relief from the pain resulted, then a dose every three hours. In twenty-four hours he fully recovered, and has since remained well.

CASE III.—Miss P., aged twenty-six. Was attacked with severe pain in the left knee, which prevented the use of the limb. I found her excessively nervous and with some general fever. Gave Veratrum viride tincture, one drop every hour. In a few hours complete relief followed the use of this drug.

CASE IV.—Mrs. H., aged forty-two, of a decided scrofulous diathesis, was attacked with rheumatism of the left hip and leg. The pain was severe and the limbs restless. Gave Veratrum viride tincture, a dose every two hours, one drop, which relieved her of her suffering in forty-eight hours.

CASE V.—Mrs. H., aged forty, nervous temperament and subject to dyspepsia, had severe, agonizing pains in the right shoulder, extending along the scapula and into the back of the neck. The arm was paralyzed and immovable, pulse accelerated and tense, tongue coated white. She had been in this condition for several days, with aggravation at night, so as to preclude sleep. Gave Veratrum viride tincture, one drop every hour. The effect of a few doses was to produce profuse perspiration, and to bring about relief from her sufferings. Rhus tox. was given in alternation with Veratrum viride to relieve the paralyzed condition of the arm. This case fully recovered in a few days.

It will be observed that all these cases occurred upon the left side. I have been led to look upon Veratrum viride as a specific for all this form of trouble. In neuralgia I do not think it equal to *Belladonna, Aconite, Spigelia,* or *Kalmia.*

Dr. J. C. Peterson expressed his opinion that,

In all inflammatory conditions where we find a complication with the stomach, I prescribe Veratrum viride in preference to Aconite. Thus in catarrhal fevers we often have nausea and perhaps vomiting, even at the onset of the disease. For such cases I use the *Veratrum viride,* even though Aconite might be indicated by the purely inflammatory symptoms. I have succeeded with the happiest results by this course.

Its action on the *mucous membranes* is probably extensive. Like Tartar emetic, it will cause hyperæmia, and even acute inflammation if applied locally, or even by its internal administration. In the latter instance, however, its action is secondary. In all the inflammations of mucous surfaces it has been praised by physicians of both schools.

Dr. A. V. Marshall, of Vermont, reports the following cases of *catarrhal inflammation,* treated with Veratrum:

CASE I.—Miss T. called at my office, complaining of a cold which caused her to cough very much. Gave Aconite and Pulsatilla. About a week later she sent for more medicine, saying that she coughed more than ever. I prescribed for her several times during the next two months, with little or no benefit. By this time all the neighborhood was alarmed, as they supposed Miss T. must die

soon of consumption. About this time I thought best to find out what ailed my patient, for I had given little attention to the case before, as I supposed the trouble was protracted by taking new cold. At this time, I found hard pain in the forehead, above and between the eyes, extending towards the back part of the head; for chest symptoms I found only slight bronchial irritation. She coughed hard day and night, and could sleep only one or two hours out of twenty-four; raised thick, white or yellowish matter; most in the morning, or after getting a little rest. At times she felt something tickling down the back part of the throat, as she said. I diagnosed catarrh of the posterior and superior nares, and prescribed Veratria 2d trituration, the bottle of it to be shaken so that the dust of the powder will rise freely, and held under the nostrils while inhaling the breath once in four hours. The result was speedy and permanent cure.

CASE II.—Mrs. M——. In her imagination she is afflicted with almost every malady that ever she heard of; thinks she is going to die, and wishes she could die, and yet she "would not die for all the world;" just such a patient as no one likes to doctor; one particular symptom was hard and constant burning pain above, between, and back of the eyes; discharge from the nose and throat of what she compared to thick starch. She has been under the care of an allopathist for months. He tells her that her stomach is out of order; that the head symptoms are sympathetic, etc. (?) Ordered Veratria, as in case first, and a weak infusion of Cypripedium, one spoonful three times a day. Three days later she was the same, except that the catarrhal discharge was more profuse; ordered the snuff (Veratria) to be taken only once a day. She improved rapidly, took the snuff less frequently as she gained, and in two weeks she was able to attend to the household duties, and was about as good as new. I have used the Veratria in the same form in numerous cases with perfect satisfaction.

We have no proof in our proving, or in the cases of poisoning on record, that it causes any eruptions when taken internally; externally it causes erythema and vesications. Professor Lee says it is an "epispastic;" it causes perspiration, not like Opium, which stimulates the skin, but like Tartar emetic. In other words, the sweating is *passive*, from depression of function. In allopathic practice the Veratrum viride has been used externally in local inflammations. The tincture should be combined with Glycerin, two parts to six. Apply by saturating lint, and putting it on the inflamed spot. It is reported to have cured a case of shingles, applied externally in the form of diluted tincture. In chronic skin diseases it has been used, according to Professor Lee, with much benefit. A popular ointment for the cure of scabies, tinea capitis, etc., is made from this plant, but its external use in such cases is not devoid of danger.

In the febrile *exanthemata* the Veratrum viride has proved efficacious in homœopathic practice.

In *small-pox* or *variola*, when the fever is intense, with excessive pain and restlessness, the Veratrum viride will prove as reliable as Aconite, and, in some cases, even more satisfactory. I have used it in but one case of variola; four drops of the 1st decimal were given every hour, with the effect of mitigating the severity of the fever and hastening the occurrence of the eruption. The recent use of the *Sarracenia purpura* in this dreaded disease now attracts much attention, and bids fair to supersede all other remedies.

Dr. Holcombe, of New Orleans, thinks highly of the use of Veratrum viride and Macrotin in variola. He says:

Small-pox I have always regarded as a self-limited disease, running a specific course, and very slightly modified by medicinal measures. I passed through a dreadful epidemic of it at Natchez, in 1863, and have seen a good many cases in this city in the last six months. Tartar emetic, Causticum, Croton tig., Mercurius corrosivus, Thuya and Variolin have been my mainstays, and I have every reason to be satisfied with my treatment, the mortality being very small; still the natural history and course of the disease has been pretty much that described in the books for the last hundred years. Lately I noticed that Dr. Wilkinson, of London, had great confidence in *Veratrum viride* for small-pox; and remembering that Dr. Hill, in his epitome, and Dr. Smith, of Chicago, had recommended *Macrotin* in the warmest manner, I determined to alternate the two. I began on a very severe case. The constitutional symptoms were violent, and the patient was thickly peppered with the eruption, although it was not confluent. I gave Macrotin, one-tenth of a grain, and Veratrum viride, one drop of the mother-tincture, alternately every two hours. The case went along very smoothly; the vesicles did not go on to full maturation; the great majority of them flattened rapidly, dried, and fell off. I had never seen so rapid a cessation of the disease before, nor so prompt convalescence. I have pursued the same treatment in three more cases, all with the same result. It will take a vast amount of evidence to prove that anything can abort the development of the variolous poison, but the above cases are certainly valuable. Nothing else whatever was employed except bathing some portions of the skin in warm whiskey and water to relieve the intolerable itching, which is sometimes so distressing.

In *measles*, during the febrile stage, and especially if pulmonary congestion is feared, the Veratrum viride is a most useful remedy. Under its use the dyspnœa, cough, and pain rapidly subside. In children convulsions often precede the outbreak of the eruption. If Veratrum viride is given at the outset, this accident will gen-

erally be prevented. The next most useful remedies in this disease are Gelseminum, Pulsatilla, Euphrasia, and Sticta.

In *scarlatina* it is infinitely superior to Aconite, Gelseminum, or any other remedy except Belladonna. I allude to the scarlatina simplex and scarlatina anginosa during the first or febrile stage. It controls the pulse, even when given in the low dilutions, better than any other remedy, and hastens the normal appearance of the eruption. The testimony of some of the most prominent physicians of the homœopathic school sustain this assertion. Dr. Small prefers it to any other remedy when the arterial excitement is intense, and there is danger of cerebral congestion or irritation of the spinal centres. It is well known that in this disease the arterial excitement is more severe, the pulse more frequent, and the heat of the skin greater than in any other; the Veratrum viride will sooner modify this condition than Aconite or Gelseminum. It should be given in alternation with Belladonna; the doses must be varied to suit the severity of the case. For children, the dilutions from the first to the third decimal; for adults, drop doses of the mother tincture may be required. The best rule is to *give enough to control the arterial excitement.*

It is useful in certain sequelæ of scarlatina, viz., rheumatism and cellulitis, when febrile symptoms are manifested. In *erysipelas* it is often useful. Besides its specific action in controlling the arterial excitement, it appears to be homœopathic to the vesicular variety; for the application of Veratrum viride to the skin often causes an eruption closely resembling that form of the disease, and even its internal administration is said to have caused a similar eruption all over the body. When cerebral symptoms occur from a supposed metastasis of the inflammation to the brain, and we find the pulse very hard and very *full*, we may expect much benefit from this remedy in alternation with Belladonna, Apis, or Arnica. If the febrile symptoms assume a low or asthenic type, Rhus tox., Arnica, Muriatic acid, or Baptisia, will be more applicable. The Veratrum viride has been used, as an external application, with alleged benefit in cases of erysipelas; a weak solution, one drachm to one pint of water, may be applied with soft cloths.

Since the first edition of this work, the use of Veratrum viride,

in erysipelas, internally and externally, according to my suggestion, has been adopted with successful results.

Dr. Wilkinson, of London (England), praises it highly—is rather too enthusiastic in fact. In his work he gives several cases illustrating its efficacy, but the cases he gives are not quite satisfactory.

Dr. Drummond, of England, also values it highly in erysipelas. He uses a lotion of thirty drops to half a pint of water, applied constantly to the diseased surface by means of lint. He reports three cases; the first, a case of erysipelas of the face and scalp, in which the lotion, in a few hours, sufficed to disperse the redness and swelling, whilst the pain was mitigated from the first application of the lotion:

CASE I.—Mr. N., aged sixty-two, employed in a gas-works, called upon me on the 12th of June, 1865. He had been spending a few days in the country, and had been exposed to excessive sun-heat. His face was greatly swollen, and the eyelids so much puffed that he could only find his way with difficulty, and he complained of the burning and stinging pain of the face. He had applied, during the two previous days, cream and buttermilk, and had taken some aperient medicine, but without the slightest relief. As there was little constitutional disturbance I simply ordered him to use the Veratrum viride as a lotion to the face, by means of lint moistened with it. This gave relief, and I heard no more about him except through his son.

CASE II.—Miss T. D., aged nineteen, after an exposure to damp during the catamenial period, was attacked with erysipelas. I did not see her at the onset of the disease, but she had been advised to take Belladonna and Rhus alternately, and to apply a saturnine lotion to the face. She disliked this lotion, and at last refused to use it, and gin and water was substituted by her friends. The next day I visited her; the nose, eyes, and forehead were much swollen, and the scalp was very sensitive to pressure to the vertex, although it did not appear puffed. The only change suggested in the treatment was the substitution of the Veratrum viride for the other lotions. Amendment at once set in, and she was convalescent within a week, and she spoke most favorably of the effects of the Veratrum.

CASE III.—Mrs. G., aged forty-six, a stout, plethoric lady, with a strongly marked gouty diathesis, was taken ill on the 21st of May, 1865. She had been sitting on the lawn watching some friends play croquet until late in the evening; after returning to the house she had a severe rigor, followed by pungent fever and distressing, throbbing headache. I saw her next day, pulse 100, tongue coated and dry, thirst, headache, severe pain in the right leg, and complete inability to move it. Upon examining the leg, found it intensely red from the ankle to above the knee, swollen and œdematous, the skin looking as though it must burst. Low diet, Aconite A, and Belladonna A, alternately, and dressed the leg

with strips of lint, moistened with Veratrum lotion, which were covered with oiled silk. In the evening the fever less severe, the headache still most intense; ordered Rhus and Belladonna, and the lotion to be continued.

May 23d. The headache most distressing, the leg looks paler, but the erysipelatous blush has extended up the back of the thigh. Lotion to be applied to these parts, to take Mercurius vivus A, gr. ij immediately, and then continue the Belladonna and Rhus. Evening, the headache is so intense she declares she must go mad if she does not get relief, and is annoyed at my expressing a wish to examine the leg, which she says is comfortable; the erysipelas less; ordered Glonoin I and Apis mel. B, and the lotion to be continued.

May 24th.—After the first dose of Glonoin fell asleep and slept tranquilly for two hours. Head much relieved; leg better. From this date she gradually improved, and it is not necessary to detail the daily symptoms. Several weeks elapsed before she regained sufficient strength to move about, the leg remaining so much swollen that she could not put a stocking on. She, however, gradually improved from day to day, and went to Weisbaden, in July, for the benefit of her gouty symptoms, from which place I have received most favorable accounts of her progress.

The Veratrum viride acts upon the brain similarly to Aconite and Gelseminum, yet their effects are far from identical. The therapeutic range of Veratrum over affections of the brain is far greater than that of the latter. I know of no drug, not even Belladonna, so useful in affections of the head when they are of a *congestive* character. In *cerebral congestions* it is immensely superior to any known drug. This assertion is made understandingly, and based upon an experience of twenty years with it. It is most useful when the congestion arises from *plethora, vascular irritation, coup de soleil, alcoholic stimulants, teething in children,* and especially when it occurs from suppressed discharges. When the congestion occurs from rheumatic irritation, Cimicifuga or Aconite are better indicated. The symptoms calling for Veratrum viride are: a sense of fulness; weight or distension of the head; giddiness; intense headache, with fulness and throbbing of the arteries, sometimes with stupefaction; increased sensitiveness to sound, with buzzing, roaring, etc.; double, partial, luminous, painful, dim, or otherwise disordered vision; nausea and vomiting; tingling, numbness, etc., in the limbs; mental confusion; thick speech; loss of memory; convulsions or paralysis of motion.

For the congestions of the head in young children, from teething, I have for several years given this medicine the preference over Belladonna or Aconite; also in cerebral oppression occurring

during the progress of a pneumonia. I consider it as perfectly homœopathic to these before-mentioned congestive conditions as any other drug in our Materia Medica, for it has caused all the symptoms of such morbid states. It does not cure by depressing the vital powers, as bleeding does. Those who denounce the use of Veratrum viride in vascular irritation, fever, etc., might as well denounce Aconite and Gelseminum, for they all act in a similar manner. The increased action of the vascular system is a secondary effect of these medicines.

In *meningitis* the Veratrum viride should be used promptly, in the lowest dilutions, alternated with Belladonna, when the latter remedy seems indicated. I believe it to be more useful in this disease, as well as *cerebritis*, than Aconite. In tubercular meningitis or hydrocephalus, it can do no good, except in the stage of active inflammation, if that stage exists; but it may be palliative in preventing or arresting spasms in the later stages. Three cases occurring in my own practice will illustrate its usefulness in *congestive headaches*.

CASE I.—Five drops of Veratrum viride, one-tenth, three times a day, cured a case of habitual congestive headache which had troubled a young and plethoric lady for over six months. She took the medicine four weeks. From having attacks every day or two, they came only once a week, and finally subsided entirely.

CASE II.—A young, stout, and very plethoric servant girl, had intense congestive headache at each menstrual period (the menstrua were very scanty and painful). The attacks were almost apoplectic, rendering her delirious or insensible, with dark-purple redness of the face, throbbing of the carotids, epistaxis, and partial paralysis of motion, and sometimes cramps. No hysterical complication was present. After taking *five* drops of Veratrum viride, one-tenth, as follows, three times a day during the intermenstrual period, and every hour during the attacks, she was much benefited, the menstrua were more abundant and the headache slight. The second period was much more natural, with very little headache.

CASE III.—Intense congestive cephalalgia, from suppression of the menses. Bleeding had been decided upon by another physician (an allopathist), but at my suggestion to the family the Veratrum viride was tried. Ten drops of the one-tenth, every thirty minutes, relieved her in two hours, and the menses reappeared.

A plethoric gentleman of this city has attacks of intensely congestive headaches; he becomes stupid, has ringing in the ears,

bloodshot eyes, thickness of speech, hot head, and a slow pulse (70) full, *and hard as iron.* Bromide of potassa never relieves him, but a few doses of Veratrum (two drops θ every half hour) always gives him relief.

Most of the effects of Veratrum upon the *ears* and *eyes* arise from a depressed state of the circulation. The same condition is present as after excessive bleedings, or loss of any of the vital fluids. In high potencies it may prove useful in similar affections. But Veratrum viride causes, secondarily, congestion of the brain, with ringing of the ears. In low dilutions it is one of the best remedies for the latter condition. It is well known that anæmia and plethora will produce nearly the same array of *brain* symptoms, although opposite pathological states are really present. Thus, *acute* hydrocephalus is often simulated by the hydrocephaloid disease which arises from sheer debility.

It is primarily homœopathic to *amaurosis* from *anæmia*, or from loss of fluids, or from debility during convalescence (should be alternated with China, Phosphoric acid 1st), and given in the 6th dilution. It is also indicated in amaurosis from irritation or congestion of the optic nerves, when the symptoms correspond with its pathogenesis.

The Veratrum viride produces undoubted inflammation of the mucous membrane of the œsophagus, with superficial erosion, spasm, etc. We have here a truly homœopathic remedy for *œsophagitis.* It is also homœopathic to *spasmodic stricture* of that tube.

Its action on the stomach is quite similar to that of Veratrum album, Tartar emetic, or Arsenicum. It is evidently homœopathic to cardialgia, gastralgia, and neuralgic or spasmodic affections of the stomach, when accompanied by vomiting, retching, and excessive irritation. Dr. Burt considers it the best remedy in such cases, better than the Veratrum album. He uses it at the 3d or 6th. It should not be given lower. It should prove curative in gastritis, erosion of the stomach, and ought to palliate the pain and vomiting in cancer of the stomach. It causes all the symptoms of pyrosis, waterbrash, and many of the symptoms of "dyspepsia."

There is no reason why Veratrum should not be an excellent remedy in *vomiting.* The act of vomiting, however, should be attended by some peculiar symptoms, either (*a*) loss of power over

the œsophagus, in which the vomiting is painless, or (*b*) intensely painful mucous irritation of the œsophagus, with burning, rising of bloody mucus, and very severe *cramps in the stomach* and *spasms of the œsophagus*, empty retching, etc. Like the vomiting of Veratrum album, the slightest quantity of food or fluid is ejected, but it has not the *intense thirst* of that remedy.

There is nothing very peculiar about the substances vomited. I consider the *empty, painful retching, with ejection of a little bloody, frothy mucus*, as the chief indications.

The *liver and portal system* must be affected by this drug, as it affects other organs. By its primary effect it causes *venous stasis in the portal circulation*, but I have not discovered its special usefulness in this condition, nor should I consider it indicated unless the pulse was very weak and very slow.

A microscopical examination of the liver of dogs killed by Veratrum showed *intense capillary engorgement.* In *hepatitis*, during the first stages, it should be a capital remedy. It will be indicated more by the absence of acute pain than its presence. It is well known, particularly since Inman called attention to the fact, that inflammation of the liver, lungs, pleura, and peritoneum may occur without any of the sharp stitching pains which are generally considered as belonging to such conditions.

Veratrum, unlike Aconite and Bryonia, is not indicated by the pain, soreness, etc. The intense fever, the *hard* pulse, and the usual physical signs are its best indication.

Of its action on the *spleen* we know very little.

In the uræmia which attends the last weeks of pregnancy and precedes convulsions, the kidneys are very torpid (acutely congested), and the pulse becomes intensely *hard.* Here we shall find the Veratrum a most powerful remedy for arousing the kidneys to action, causing the elimination of urea and lessening the dangerous arterial pressure.

It is agreed by all allopathic medical writers who speak of this plant, that it irritates the bowels much less than Veratrum album. Some, however, claim that it should not be used in diseases where any intestinal irritation exists. Wood, however, does not mention it as a purgative. Dr. Coe remarks:

The employment of Veratrum viride in the treatment of diarrhœa and dysentery affords occasion for some remarks in regard to the action of this remedy upon the bowels. We have seen it stated by some writers that Veratrum is objectionable on account of its irritating influence upon the intestines. Such has not been our experience. We have employed it much in the treatment of bowel complaints, and with the most happy results.

Yet he admits that it has an "emeto-cathartic" action, and says it is contraindicated in "intestinal ulcerations." He says it is useful in all cases of "torpor and debility of the abdominal organs," and is of utility in mania, epilepsy, hysteria, convulsions, melancholy, etc., when arising from "functional obstructions of the abdominal viscera, and disturbed and discordant action of the abdominal nervous plexus." All this, however, is quite conjectural, although it is apparently indicated in abdominal congestions. Dr. Norwood says "it is not cathartic," but he speaks of "avoiding its drastic effect," and mentions that "the only cases in which we have seen it purge were when given in combination with Tartar emetic. In most of these cases it excited a violent *cholera morbus*." Concerning its therapeutic effects he states: "We have found it of great value in the treatment of typhoid dysentery, and would feel unable to combat that disease without it, or some other remedy of equal power." It seems homœopathic to about the same condition of the bowels as Veratrum album; also to hæmorrhoids.

Its action on the kidneys has been pretty well investigated by allopathic observers. Professor Lee says:

Its diuretic action has been established by numerous experiments. It is worthy of particular note that it does not act as a mere renal hydragogue, but like Colchicum it increases the solid constituents of the urine. While it increases the amount of organic and inorganic solids, it is not positively established that it augments the quantity of the uric acid. Like Colchicum it increases the amount of the urine, as well as the total amount of the solids eliminated, but it is pretty generally certain that this is mainly dependent on an increase of organic matter. Its curative influence in gout and rheumatism may thus be explained. It is said to eliminate lithic acid through the kidneys.

Dr. Abbott made some experiments which proved that it causes a considerable increase in the amount, and a corresponding decrease in the specific gravity of the urine. It would seem to be

homœopathic, primarily, to certain forms of diuresis, enuresis, and perhaps diabetes. It is curative in acute inflammation of the kidneys and bladder.

We have yet no symptomatic proving of Veratrum viride upon the female organism. It is said to have caused *abortion* in numerous instances, yet Drs. Ford and White, who used it so freely in yellow fever, thought it *prevented* that accident. It may not cause abortion directly, as Sabina or Cimicifuga, but indirectly, by the great prostration of the general symptoms, the severe efforts to vomit, etc. In the same way it would cause hæmorrhage from the uterus. It is probably homœopathic, *primarily*, to *passive* congestions of that organ. My experience with the Veratrum viride, in this class of diseases, is confined principally to acute inflammation of the uterus, or *puerperal metritis*, in which I place a high estimate upon its value. I think I have arrested the inflammation, or materially modified it, by the use of the lower dilutions. There are certain conditions attending uterine disorders in which the Veratrum viride has proved very successful in my hands. I allude to those congestions of the head or lungs which occur during uterine disorders, such as *menstrual* congestions of the head (menstrual headache), also congestion of the head and lungs from suppressed menses, suppressed lochia, etc. In these accidents, a few drops of the lowest dilutions has never failed to prove promptly curative in my practice. It is highly recommended by Dr. Miller (eclectic) in *dysmenorrhœa* occurring in plethoric subjects (*i. e.*, congestive dysmenorrhœa). In anæmic subjects he pronounces it decidedly injurious. It is probably indicated in this affection for similar symptoms to Aconite and Belladonna.

Acute congestion of the uterus causes *scanty menses*. When this disorder is present in plethoric women, and is attended or not by congestion to the head or chest, give the medicine in drop doses of the tincture.

Congestive dysmenorrhœa comes under its curative sphere. Dr. Eggert, of Indianapolis, made a brilliant cure of this condition with Veratrum viride. Although a stanch partisan of the high dilutions, he used the lowest in his case with very excellent results.

In *acute metritis* and *ovaritis*, attended with a high grade fever,

no remedy is more efficient. It equals Apis in *pelvic cellulitis;* in fact, to treat a case of this grave disease successfully without the two remedies is next to impossible. They will often prevent suppuration if given in time.

Puerperal peritonitis is most successfully treated (if high fever is present) with Veratrum viride and Opium (both in appreciable doses).

In *idiopathic orchitis*, its internal administration, aided by its local application, often acts magically. If the inflammation be traumatic, alternate it with Arnica or Hamamelis; if gonorrhœal, with Pulsatilla, Clematis, or Erigeron, and Hamamelis topically. The treatment of orchitis by means of *strapping* is a great aid to internal remedies.

The treatment of *mastitis*, when the breasts are very hot, hard, and engorged, is most successful when Veratrum viride and Phytolacca are given alternately, and cloths wet in a lotion of Phytolacca are applied.

Dr. A. C. Barlow, of Toledo, writes:

> For violent menstrual colic previous to the occurrence of the discharge, I use Veratrum viride tincture in drop doses, repeated every half hour or hour. It is invariably followed by a marked mitigation of suffering and the establishment of the periods. I could cite from my note-book hundreds of these cases.

It has been found useful in palliating violent attacks of *hysterical convulsions.* Many allopathic writers, among them Dr. Simpson, of Edinburgh, extol it highly in *puerperal fever.* It may prove useful in the *vomiting, pyrosis*, and other symptoms occurring during *pregnancy.* Many of the symptoms occurring during the change of life are simulated by this medicine. In *acute mastitis*, with high febrile action and great tumefaction of the breasts, I have used it alternately with Belladonna with very satisfactory results. It has been used boldly, recklessly, by the allopathic school, in puerperal convulsions (eclampsia) as a substitute for bloodletting, but in such doses as to be nearly or quite as pernicious as the abstraction of blood. I have never used it in that affection, but I have administered it in cases where I thought convulsions *would* ensue if not warded off, and with the apparent result of preventing that terrible array of symptoms. In *puerpe-*

ral mania it has proved curative. (See a case reported by Dr. Woodward.) Dr. Atlee reports a case as follows:

The labor had been preternatural; child delivered dead, by podalic version. She did well until ten days after confinement, when she became silent, suspicious, and distrustful of those about her, without any obvious cause. In the hope that the change was temporary, opium and perfect rest, with careful watching, was enjoined. Two days after, symptoms of puerperal mania were still more developed; it was impossible for the doctor to come near her, his presence seemed to terrify her, and her husband told him that since the last visit she expressed strong apprehensions that the doctor had poisoned her and meditated her destruction. She had slept little or none, and it was difficult to keep her confined to her bed and room. In the hope that some benefit might result by controlling the general circulation and diminishing the nervous excitement, five drops of the tincture were given every three hours, as long as it did not produce nausea, vomiting, or prostration. On the following morning, on entering the room, he found his patient lying quietly and calmly on the bed, with a total absence of the sinister expression of the day before. She answered him slowly, but in a whisper, put out her tongue, and let him feel her pulse without resistance. Upon inquiry he found that soon after the administration of the third dose of Veratrum on the previous evening, she had become calm, had rested quietly, and had remained so. Pulse fifty-six. She was cheerful and obedient, conversed rationally and freely, and without allusion to her previously unhappy condition. She recovered perfectly in a few days.

Dr. Coe states that a majority of the cases of mental aberration arise from and are dependent upon a morbidly increased activity of the nervous structures of the abdomen. "This," he says, "would seem to explain why Veratria is of utility in the treatment of mania, melancholy, and mental weakness." (Very doubtful.) "In cases of mental aberration, acompanied with torpor and debility of the abdominal organs, Veratrum will be found serviceable." (Mere theory.)

The symptoms of Veratrum relating to the chest consist only of "great oppression" and "heavy weight." But the physical symptoms are very important. It decreases the number of respirations to twelve or fourteen in health.

In dogs poisoned with Veratrum there was found "violent congestion of the lungs, especially the lower lobes." In cats both lungs were engorged.

In the second edition of "New Remedies" I wrote as follows:

In Dr. Burt's proving, made on himself, he makes no mention of any pains

which may be termed pneumonic, or pleuritic; the pain in the heart only was noticed. It is a notable fact, however, that in the provings of Tartar emetic we have the same absence of acute thoracic pain; yet the latter drug has a high reputation, even in the homœopathic school, in the treatment of pneumonia. It is well known by all practical physicians that severe cases of pneumonia may run their course with little or no *pain* at any time being present. The Veratrum viride has not been extensively used by homœopathists in the treatment of thoracic diseases. Satisfied with that time-honored remedy, Aconite, they prefer to adhere to that drug. But many of my colleagues, both East and West, agree with me in considering the Veratrum viride as superior to Aconite, in *pneumonia* in particular. My own experience with it has so far been satisfactory. In the incipient stage of that affection, when simple engorgement only exists, I believe it has the power of arresting the disease, and in the later stages it proves a valuable auxiliary to such remedies as Bryonia, Phosphorus, Tartar emetic, and Sanguinaria. I usually give the lowest dilution (ten or fifteen drops of the 1st dec.), every thirty or sixty minutes to adults, and half the quantity to children. In a few cases only have I been obliged to resort to the mother tincture. In one case, that of a strong robust man, five drops were given every two hours; after ten hours, profuse vomiting with sweating set in; the previously intense fever subsided, and *did not return*, and a rapid convalescence followed. It was given on the third day of the fever, when there was bloody sputa, severe oppression and pain in the chest (left side), and all the physical signs of the first stage of pneumonia.

Seven years have now elapsed since that was written, and I have had no occasion for changing my opinion. I have been criticized for asserting that Veratrum viride has the power of *arresting pneumonia in the first stage*. From the language of some of my critics I do not think they are aware of what the first stage consists. One of the best authorities thus defines it as "a stage of *congestion*, in which the affected portion of the lung is of a deep red color; crepitates under pressure, though less than in health; and when cut, exudes copiously a bloody, turbid, and somewhat frothy serum. . . . If the disease be arrested in this stage the lung reassumes the healthy appearance." Another great authority (Stokes) maintains that the congestive stage is preceded by another, "marked by *intense arterial injection with dryness*—in other words, a condition of irritation—which always precedes inflammation."

Now it is evident that these two conditions rarely exist separately. They must blend together in a majority of cases, and it is in these conditions—the *first stage of pneumonia*—that Veratrum is useful.

What are the symptoms which attend this first stage? They

are (*a*) more or less chilliness (although that may be wanting), (*b*) great heat and oppression of the chest, with sensation of a heavy load on it; rapid, laborious breathing, with or without pain; short, dry cough, etc. I still assert that if Veratrum viride is indicated in this stage it will arrest the disease, and rapid resolution will take place. What indicates Veratrum viride? *The character of the pulse.* If you find a *full, hard, bounding pulse, that cannot be obliterated by the pressure of the finger*, give Veratrum. The pulse need not be *quick.* It is the *hardness* of the pulse and its *fulness* that calls for this remedy. If the pulse is *hard, quick, and small,* Aconite is indicated. My experience confirms me in the opinion that the dose in such conditions should be about one-tenth of a drop every half hour, and in severe cases one or two drops, *until the pulse becomes compressible.* So soon as this occurs decrease the size of the dose, or suspend it altogether after a few hours, for it is only in the stage of *irritative congestion* that Veratrum is indicated in the low dilutions. In the second and third stages it should be used above the 3x, if at all, and in alternation with Tartar emetic, Sanguinaria, or Phosphorus.

Dr. Ringer, of England, in his "Therapeutics," says it is used and recommended in both *sthenic and asthenic pneumonia.* He specially quotes the experience of Dr. Drosch, who used it in seventy-three cases with good results, with the effect of "lessening the pulse, lowering the temperature 1° to 3° C., quieting the breathing, changing the character of the expectoration to a light-yellow color, rendering it scanty, and calming the patients." "It did not appear," he says, "to shorten the acute stage, but seemed even to lengthen it, retarding the resolution of the lung, and caused vomiting and diarrhœa."

It is evident that Drosch committed the great error of all allopathists, of giving it in too large doses, and continuing its use too long. By following my directions, and substituting the proper homœopathic remedy after the first stage, rapid resolution *will* ensue, and the violence of the disease will be greatly modified.

Drs. Patton and Lee (allopathic), of this country, give the following excellent testimony, and it is a notable fact that they decry the large doses in use by that school. They say:

Pneumonia is the disease in which Veratrum viride is particularly indicated. It seems to have more controlling power in this than any other disease, reducing the inflammation and favoring the expectoration in a very few hours; in some instances vomiting is induced, which is generally of tough viscid mucus; the pulse now rapidly declines, if not affected before; the breathing becomes very easy, and the patient falls into an easy sleep, with, perhaps, a gentle perspiration. The dose, now, is to be managed so as to sustain the depressed circulation. I find that in pneumonia it is better to reduce the pulse as soon as possible. The inflammation being in a degree arrested, the lung is saved from the more severe consequences of the *second staye*, or that of *red hepatization*, from the concrete fibrinous exudation being caused by a peculiar inflammatory action; thus, the cause being in part removed, this exudation is in a great degree arrested, and the patient, in a majority of cases, enters into a favorable convalescence.

As to the use in *asthenic* cases of pneumonia, I am of the opinion that it is *primarily* indicated by the prostration, the feeble, oppressed pulse, the passive stasis in the lungs, and the low grade of inflammation. Veratrum viride differs from Gelseminum and Aconite in its power of causing primarily a kind of typhoid condition, in which it somewhat resembles Baptisia. It should therefore be given above the 3^{x}, and in alternation with Phosphorus.

In *pleuritis* it is not indicated, unless in the stage of irritative congestion. The same might be said of its value in *pleuro-pneumonia*. The indications which I have given for its use in pneumonia must be your guide.

I have never used it in *diaphragmitis*, but I predict it will prove a useful remedy in that rare disease, in which it will probably rival Cactus.

Acute inflammatory diseases of the heart, at their onset certainly call for the free use of Veratrum. Experiments have proved that it causes death by paralyzing the muscular structures of the heart, by poisoning the nerves leading to the heart, or by acting on the cardiac ganglia in the substance of that organ.

It is primarily indicated in cardiac oppression, with passive congestion; cardiac debility, with fainting and collapse therefrom. In those heart affections occurring during prostrating diseases, after hæmorrhages, etc., it may be used, but always in the *minutest doses*. No remedy exercises a more depressing action on the heart than the Veratrum viride in large doses.

It is secondarily indicated in increased activity of the heart, after previous depression. In *carditis* and *pericarditis* it has been used

with alleged success by allopathic practitioners. In *rheumatic* affections of the heart it is especially lauded, but may do as much injury as bleeding if used in large doses. Having an action similar to Aconite, it will, perhaps, be found as useful as that medicine in heart affections. It does not, however, cause that intense cardiac anxiety, with fear of death, which Aconite does. It will be found palliative in many organic diseases of the heart, but should be used with great caution.

It is not a "*cardiac tonic*" in material doses, as Digitalis is said to be. It will alleviate, according to my experience, those palpitations attended with faintness, or dyspnœa, which occur in many diseased conditions of the heart, or attend the "change of life" in women. Some of the symptoms felt by Dr. Burt resemble those found in the pathogenesis of Spigelia. It may be a matter of doubt whether the "burning sensation" experienced by Dr. Burt was really in the heart; the *œsophagus* may have been the seat of the sensation.

Dr. Scudder (eclectic) says that he has ascertained by actual clinical experiment that the Veratrum viride, in *small doses*, is as much a "cardiac tonic" as Digitalis is in large. This effect is due to its primary homœopathicity to a weak condition of the heart, which it causes in pathogenetic doses.

In all *asthenic* cases, when the heart's action is *slow* and *feeble*, small doses (the 3^x or 6^x) will rally the failing vitality in a manner similar to the Veratrum *album*, to which it is very closely related.

The question arises: Is Veratrum viride indicated in any chronic structural diseases of the heart? I believe it is, and in my practice it has done me good service in *hypertrophy with dilatation*, used as a *continuous* remedy, not as a palliative. In your studies of the action of Veratrum *album* you will remember the statement that it has been used by soldiers and others to cause "pseudo-cardiac diseases," which so closely simulated the organic as to deceive the medical examiners. Dr. Muller gives many such cases; the disorders thus caused resembled hypertrophy with dilatation, or even valvular lesions! The ultimate primary effects of Veratrum *viride* will cause very similar conditions, and when given in small

doses (3x) alone, or alternated with Nux, Ignatia, Collinsonia, or Digitalis, will do good service.

It may be of service in the treatment of cardiac disorders marked by *irritability from weakness.*

It ought to be homœopathic to those cases of *cardiac failure,* or *cardiac syncope,* which come on suddenly while in apparent health. It might be tried in the 30th dil. But as such cases generally occur in hysterical subjects, Sumbul or Ignatia are probably more useful.

When cardiac hypertrophy, *with enlargement,* causes intense pressure of blood in the head, no better remedy can be found than Veratrum viride (one or two drops of the tincture until the fever is lessened).

VALERIANATE OF AMMONIA.

This medicine has not been used to any extent in our school, but allopathists value it very highly in those severe *neuralgic headaches* which are attended by great nervous agitation, conjoined to physical prostration.

It is equally useful in *prosopalgia,* when the pain is insupportable, the face is cold and pale, the extremities cold, and great nervous erethism exists.

Some of the Ammonia salts seem to have specific power over neuralgiæ. The *bromide* is efficacious when congestion of the head is present; the *muriate* when the liver is the seat of the original disorder; and the *valerianate* when the cranial nerves are especially involved.

This salt will be found useful in certain kinds of *sleeplessness,* especially when it arises from emotional excitements, hysterical conditions, or excessive indulgence in the drinking of green tea or coffee.

The first decimal dilution, in doses of ten drops, or a teaspoonful, is usually sufficient. The allopathists use the Elixir; each teaspoonful containing ten grains, which they give at each dose, repeating it every two or three hours.

VALERIANATE OF ZINC.

This salt was introduced into our school by Dr. Banks, of New York. He used it very successfully in *neuralgic headaches.*

Its sphere is analogous to the Ammonia salt in the kind of pain it cures, but differs from it in the concomitant conditions. Zinc acts more upon the brain, intracranial nerves, and the membranes of the brain. It has of itself cured many terrible cases of headache, with or without delirium, and sometimes periodical. The addition of the Valerianic acid gives it greater control over the nervous agitation which often attends neuralgia.

In Vol. I you will find a brief report of several typical cases of *neuralgia, prosopalgia, spinal neuralgia, sciatica, angina pectoris, ovarialgia,* etc. It has also been used successfully in *sleeplessness,* for the consequences (pains, etc.) of *cerebro-spinal meningitis,* and in some stages of *tubercular meningitis* in children (as a palliative). It is best administered in very small pills, $\frac{1}{10}$ to $\frac{1}{2}$ gr. of the crude, or 1 gr. of the 1ˣ or 2ˣ, coated with sugar or gelatin.

The author has noticed the fact that in a considerable number of patients troubled with hæmorrhoids, who were taking Valerianate of zinc for other troubles, the hæmorrhoids have, with few exceptions, been relieved.—C. Bradwick, M.D.

VERBENA HASTATA.

This plant, commonly known as Ironweed, grows profusely on the prairies and low bottom lands all over the United States.

It is a popular domestic remedy for *ague,* especially when chronic. The root is intensely and disagreeably bitter.

Dr. Griffin, of New York, introduced it into our practice, in a paper read before the New York State Homœopathic Society, as a remedy for the poisoning of Rhus tox. and other species of Rhus. He relied upon its external application. If it has any specific powers over Rhus poisoning, I do not see why it should not prove curative in *vesicular* and *erysipelatous* eruptions in general. I trust you will test its value in such cases. A weak infusion is, after being strained, applied constantly to the affected skin. It should be given internally at the same time in small

doses. If a distilled extract, prepared as Hamamelis is, was made officinal, I think it would be the most eligible application. I hope the whole plant will be proven soon.

VERONICA BECCABUNGA.

We know nothing of this plant beyond a remark by the late Dr. Prentice, that he had used it successfully in *stomatitis materna* and the *aphthous sore mouth* in children.

It has been considered by old authorities as antiscorbutic.

That medical archæologist, Dr. S. A. Jones, has been delving in musty and forgotten tomes, and he found therein many rare and curious bits of medical lore.

His latest researches relate to the Veronica. He finds that as early as 1578 one Dodoens wrote of it as follows: "Brooklime leves dranken in wine do help strangullion and the inward scabbes of the bladder." All those old authorities recommend it against the "gravel, stone, and scurvy." It would seem that something ought to be made out of this plant if properly proven and studied.

VISCUM ALBUM.

This mistletoe grows in England and on the Continent, and the parasite indigenous to the Southern United States is supposed to be identical.

In the "British Journal of Homœopathy," vol. xxii, and some later journals, I find this remedy highly recommended for *epilepsy, chorea, cephalalgia, vertigo, periodical neuralgia, hydrothorax, cardiac disorders* (choreic?), *menorrhagia, uterine spasms, sciatica* (many severe cases cured), and many other nervous disorders. The author of the paper claims to have cured all the above disorders with the mother tincture and attenuations.

From earliest times it had a popular reputation in *epilepsy*. In a recent journal I find a report of its successful use in several cases of *chorea from fright*. The *chorea* is probably *spinal*, for it is said that the movements continued *during sleep*.

It seems specially indicated in violent neuralgic pains in the lower extremities, simulating sciatica, *rheumatic neuralgia*, and even *peritonitis*.

It seems to be a medicine having an important range of action, but I am not aware that it has been used in this country. I have never prescribed it. In my "Symptomatology" you will find all the characteristic symptoms now known of this powerful medicine.

VIBURNUM OPULUS.

The physician who finds a remedy for any painful disorder is a public benefactor. The physician who shall find a remedy for *painful* menstruation will have the blessings of thousands of suffering women.

The use of *Viburnum opulus*, in the treatment of dysmenorrhœa, did not originate in the practice of any physician. It is a tradition in this country that the aborigines so used it among themselves, and that the secret of its use was handed down to the white people. Any way, it has been in successful use here for more than a century as a domestic remedy in many painful affections of women.

It was from observation of its domestic uses that the writer gained his first knowledge of its value. I first prescribed it in the form of a weak infusion, then in drop doses of the mother tincture, and finally in the dilutions up to the 3x. Its specific action often seems to manifest itself in the dilutions as well as in more material doses.

I find by reference to works on botany that the *Viburnum opulus* is a native of America, England, and Scotland. It grows wild here, and is also cultivated in gardens. The cultivated variety is so changed in its character that all the flowers are destitute of stamens, making it sterile. In this form it is called the Gueldres Rose, or Snowball, from the large globular or white inflorescence. In this country the wild species is called *Cramp bark*, one of those felicitous names which indicates its specific action. It is also called High Cranberry, from the resemblance its berries have to those of another species of the same genus, namely, the Viburnum oxycoccus, or common edible cranberry. Its berries are red and sour, and remain on the shrub all winter. They are eaten in this country, and in England and Norway, and are quite palatable when stewed with sugar.

For medical purposes we procure the bark of the root, shrub, and its limbs (the fresh bark is preferable), and make a tincture with alcohol of 75 or 80 per cent.

This tincture should have a dark-red color and a peculiar acid odor, very similar to the odor of Valerian; so closely does it resemble it, that I am quite certain a chemical analysis of the bark would detect the presence of Valerianic acid. (An eminent chemist, D. W. Chapman, of Chicago, assures me that such is the case.)

In my treatment of *spasmodic dysmenorrhœa*, for which variety this remedy is specifically indicated, I prescribe the ϴ tincture, or 1ˣ to 3ˣ dil., a few drops three times a day for a week previous to the expected period. When the pains set in give it every hour, or every fifteen minutes if the pains are severe. It is equally useful for the severe *false* pains preceding normal labor, and which often render the woman's life a torture for weeks. It is of great value for *after-pains*, and a dose should be given after every pain. *Cramps in the abdomen and legs* of pregnant women are controlled very quickly by it. It will prevent *miscarriage* if given before the membranes are injured, and when the pains are *spasmodic* or threatening. I have not tested it sufficiently in spasmodic affections of other organs, but predict that it will prove useful in spasmodic conditions of all *hollow muscular* organs and their muscular connections. Nor have I decided whether it acts on the muscular tissues *directly* or indirectly through the *motor nerves*. It may prove to be a spinal remedy after all.

I have used the Viburnum in many cases of neuralgic and spasmodic dysmenorrhœa, and have yet to meet with a single case where it has failed to cure.

So confident have I been in its almost marvellous powers, that I have taken pains to look up some old cases that I had dismissed years ago as incurable, in order to test this new remedy on them. In every instance, so far, it has cured these old obstinate cases. Its sphere of action seems to cover nearly the same grounds as *galvanism*. In the "North American Journal of Homœopathy," 1874, Dr. Neftel has a valuable paper illustrating the curative power of galvanism in dysmenorrhœa. He gives many illustrative cases, and,

singularly enough, they all resemble the cases I have cured with the Viburnum. I use the 1st dec. dil., or θ tincture.

Since I published my first account of the value of Viburnum opulus, I have received letters from many physicians corroborative of my experience. In some cases the testimony extends the sphere of action to more serious maladies.

One physician reports a case of *membranous dysmenorrhœa* cured by giving this medicine through two months. If this shall be verified, we have now four remedies for that painful condition, namely, *Borax*, *Guaiacum*, Ustilago and Viburnum. It remains to be seen whether the Viburnum prunifolium will be equally valuable.

Dr. Foote, of Galesburg, Ill., has had favorable results from its use.

Dr. Ruddock, of England, writes me that since the appearance of my paper on the use of Viburnum, which appeared in the "Homœopathic World," he has learned of its successful use in *dysmenorrhœa* in the practice of many English physicians. His own experience with it leads him to recommend it in *irritable ovaries*, *spasmodic contraction of the cervix uteri*, and several other painful menstrual troubles.

I shall not be surprised if it is found useful in *heart cramp*, which is the real condition, in angina pectoris, also, perhaps, in spasmodic laryngitis.

VIBURNUM PRUNIFOLIUM.

This species appears to possess some of the properties of the Viburnum *opulus*, but is probably not *identical* in its powers. It is said that it does not contain the Valerianic acid found in the latter species. I am not sure of this, for I prepared a tincture from the Black Haw bark, or what was sold as the Viburnum prunifolium, and it has the Valerianic acid odor.

In vol. vi, p. 129, of the "North American Journal of Homœopathy," were reported, by Dr. E. P. Fowler, two cases of *cancer of the tongue*. These were undoubtedly cases of malignant disease of the tongue. They were cured by the use of a decoction of the bark used topically.

I have used the tincture in *threatened premature labor or mis-*

carriage, dysmenorrhœa, and various *spasmodic uterine pains* with good results.

Dr. Phares, of Alabama (allopathist), who has used the Viburnum *prunifolium* very extensively, writes of his experience as follows:

It is nervine, antispasmodic, tonic, astringent, diuretic, and may be used to very good purpose in urinary affections, ophthalmia, aphthous sore mouth, chronic diarrhœa, dysentery, indolent ulcers, etc. It is an excellent remedy in colic, cramp, spasms, palpitation, and other affections incident to pregnancy, or arising from uterine disorders, and for after-pains. But it is *particularly valuable in preventing abortion and miscarriage, whether habitual or otherwise; whether threatened from accidental causes or criminal drugging.*

It tones up the system, preventing or removing those harassing nervous symptoms that so often torment, wear down, and disqualify the pregnant woman for the parturient effort. It enables the system to resist the deleterious influences of drugs so often used for the purpose of procuring abortion. It is well known that the inner bark of the cotton-root is used by many to induce miscarriage, one pint of the strong decoction being sufficient for this purpose. The regular exhibition of the Viburnum completely neutralizes the effect of the Gossypium, compelling the delinquent mother, however unwilling, to carry the fœtus to full term. Some farmers on whose plantations I have used this medicine, and who have seen much of its effects on negro women who always managed to miscarry, declare their belief that no women can possibly abort if compelled to use the Viburnum. This may be claiming too much for it. But it has certainly prevented abortion in every case in which I have ordered it for the purpose. Negatively, miscarriage has never taken place, so far as I am informed, in any case in which this medicine was used as a preventive.

Brief notes of a few cases will give a better idea of my mode of employing this medicine.

Case I.—Mrs. ——, widely known as an authoress, of very pale, delicate appearance, aged about twenty-seven, when some three months married, aborted from injury received in leaping from the floor into bed. Once or twice subsequently she aborted at the same stage of pregnancy; once, I learned, twins. In August she came under my care for severe intermittent fever; and, on the 16th of September, 1864, being again pregnant, she consulted me with a view to prevent abortion. I ordered Tincture viburni, f℥j bis, *vel ter in die;* oftener, when threatened, till the danger is passed. She continued going on well for more than three months after the usual time for her misfortunes, when, removing beyond my reach, I lost sight of her. Several times she had to use the medicine very freely. I think it was on the 6th of October, an artillery and cavalry fight took place near the house where she was boarding; her husband, wounded some time before this, was compelled to fly for safety; charges were made through the yard; a number of soldiers were killed about the place; the house was ransacked, and an old gentleman living with the family murdered; yet she passed safely through this time of excitement and trial.

CASE II.—In March, 1865, Mr. W—— consulted me in regard to his wife. He said she had never gone to full term, but had had several children at the eighth month, all of them dying one month after birth. Frequent pregnancies and hæmorrhages had seriously impaired her health, for improving which I ordered suitable remedies. To prevent premature parturition, she being again pregnant, I directed Tincture viburnum. At the eighth month, as usual, labor commenced vigorously, with copious sanguineous discharge. Both were soon arrested by a free exhibition of Viburnum. She went on till full term, and gave birth to a healthy boy, who still survives at a year old.

CASE III.—Mrs. M——, mother of several children, has for several years suffered much from dysmenorrhœa, leucorrhœa, hæmorrhages, and abortions, and is pale, feeble, and despondent. I ordered iron by hydrogen to improve the blood and nervous system, Fowler's arsenical solution to check leucorrhœa and prevent hæmorrhage, and Tincture viburnum to allay uterine congestion, pain, irritation, and to tone up the reproductive organs. Some months afterward, March 2d, 1865, I was summoned in haste to see her. She was much improved every way, and supposed two or three months pregnant. Two bodies of troops had been ordered to form a junction and prepare for battle instantly, at a point a mile distant, but visible from the upper story of the dwelling. Running hastily up stairs to see the array, she was hurt; pains commenced, and, almost immediately, pretty free hæmorrhage, which alarmed her excessively. A Viburnum tree growing within a few paces of the house, I ordered infusion of the bark, which soon put a stop to both hæmorrhage and contractions. On the 16th of August following, before day, she was alarmed by the escape of liquor amnii, and I saw her early in the morning. As there was no pain, contractions, or other indications of labor, I left her. This was a small leak, and she informed me that labor had been brought on in a previous pregnancy by a similar leak. About dark of the next day, forty hours after the flow commenced, I again saw her, and at 11 P.M. delivered her of a healthy eight months' child, which still survives.

CASE IV.—January 25, 1866, Mrs. L——, eighteen months married, had miscarried last year, in consequence of which she had suffered long and much, now pregnant and threatened with abortion. I ordered Tincture viburnum f℥j thrice a day; oftener, if necessary. She went on well till the 10th of April, when she was severely injured by a fall from her carriage. Strong uterine contractions ensued, but were arrested by the medicine, which had to be used freely for several days, gradually diminishing the quantity per diem. For nearly a week abortion was threatened whenever the use of the Viburnum was too long omitted. From this time she went on to full term without further accident, and was delivered of a large boy.

CASE V.—January 25th, 1866, Mrs. H——, married in 1862, has had no children, but an abortion or two, now pregnant, and threatened with abortion at the usual stage with her. I gave her Tincture viburnum, with directions to use *pro re nata*. March 4th, summoned again to see her. I find she has had considerable pains, contractions, and discharges for two days. She had taken the medicine as ordered, and was now up, easy, and the discharge a slight oozing merely. Ordered the medicine discontinued for the present. She had to use it again a

month later, and from that time continued well, and at full term gave birth to a healthy child.

CASE VI.—July 11th, 1866, Mrs. J——, six or seven months pregnant, has had labor pains increasing in frequency and force for over thirty hours. I ordered Tincture viburnum every hour, or as often as needed, until pains cease. Labor was soon arrested, and no further trouble has occurred.

CASE VII.—Mrs. P——, April 16th, 1866, has had severe colic, after noon, several days. Tincture viburnum f ʒiss was ordered, and the dose was all required.

Many cases might be cited, but the above handful will suffice as well as a thousand. There will be cases and conditions, of course, in which no intelligent practitioner would attempt to prevent abortion by the use of Viburnum, or any other means; as where the placenta is extensively detached, the membranes ruptured, the fœtus partly expelled from the uterine cavity, etc.

I have therefore, for some years past, made known the use of this valuable agent, in conversations with members of the profession, as well as by letter. Its value as a medicine is so well ascertained as to justify a lengthy article in print, and its general use by the medical profession. The bark may be gathered at any time, but is best, perhaps, gathered in October and November. When practicable, I have preferred obtaining it from trees in open, exposed situations. Situation materially affects the qualities of plants. A plant, for instance, which, gathered on the level of New Orleans, is inert, gathered here is probably the best remedy in the world for tetanus, of which, more another time.

Viburnum prunifolium in Threatened Abortion and in Menorrhagia.—I send you a report of two cases in which Tincture viburnum was used with success; you can publish same if you deem it necessary.

CASE I.—On September 23d, 1878, I was summoned in haste to see Morilla ——, a colored woman, about thirty-two years old, who had received a wound from a fall. On reaching her home I learned that patient, while attempting to replace a rope in a well-whirl, had fallen from the well upon the sharp, ragged edge of a rail which was driven in the ground near by, with one end protruding, making a wound about five inches long, just above pubes, penetrating as far as the muscles of the abdomen. The woman being somewhat advanced in pregnancy, the shock brought on strong labor pains. After dressing the wound with ligature and adhesive strips, I made examination per vaginam, found the os considerably dilated, pains continuing regularly. I gave her Tincture viburnum ʒj, Water, ʒj, with directions to take the same quantity if the pains did not cease in one hour. Calling two or three hours after, I found the patient resting very quietly, with pains relieved. Woman recovered, and will soon be confined.

CASE II.—The next case was a case of menorrhagia (excessive menstruation), in which the various preparations of Iron, Ergot, etc., were used without relief. I finally put patient on a teaspoonful Tinct. viburnum, beginning with the medicine two days before her period. Flow was considerably diminished. Ordered her to repeat same at her next period, which she did with marked relief. Patient was a married woman; had been married two years; no children. After taking the Viburnum a second time she became pregnant and will soon have reached full term.

The medicine acts, no doubt, as a uterine sedative, but I cannot explain the action. I would be very glad if I could see something in reference to it in your valuable journal.—D. B. Nisbet, M.D., of Georgia, in "Southern Medical Record."

WEYTHIA HELENOIDES.

This new California drug was proven by Dr. Selfridge, of Oakland, California. I present his proving and clinical cases. I consider it one of our most valuable acquisitions. Its analogues are Arum dra., Causticum, Hepar sulph., Sticta, Rumex, Penthorum, Phosphorus, and Sulphur:

The symptoms here recorded were observed by seven men and two women. The green root in substance or the mother tincture was used by each prover. When the tincture was used, the dose varied from five to forty drops. The plant has been used by unprofessional people, in some of the interior towns of this State, for coughs and colds, under the name of "poison weed."

The taste of the root is herbaceous, aromatic, and slightly bitter, leaving a sweetish sensation in the mouth. The symptoms here given are recorded in the order of their occurrence as nearly as can be ascertained. No symptoms were manifested for some minutes after chewing the root or swallowing the tincture.

Symptoms.—Sense of weight in the stomach, as if something indigestible had been eaten; belching of wind, alternating with hiccough; mouth feels as if it had been scalded; sensation of heat down the œsophagus into the stomach, worse while eating.

Dryness of the fauces; constant desire to clear the throat by hemming; increased flow of tough, ropy saliva; throat feels swollen; epiglottis dry, and has a burning sensation; constant desire to swallow saliva to relieve the dryness, yet affording no comfort; swallows with difficulty. Pricking dry sensation in posterior nares; sensation as if something was in the nasal passages; an effort to clear the throat affords no relief. The uvula feels elongated; dry hacking cough, caused by a tickling of the epiglottis. Pain in the back, which extends to the extreme point of the spine; pain in the left ovary, shooting down to the knee. Pain in the right arm, with stiffness of wrist and hand.

Severe headache; rush of blood to the head; dizziness; pain in the forehead over the right eye, at first sharp, followed by a feeling of fulness; itching in the right ear; cold sweat over the whole body, which soon dries off, and again comes and goes as if by flashes.

Nausea and vomiting; burning sensation in the bronchial tubes; sharp pain just below the ribs on the right side, deepseated, followed by soreness. Passages previous light-colored, irregular and constipated, become regular, dark-colored, and soft; passages loose, diarrhœic, dark-brown color; came on in the night and lasted five days. Itching of the anus; greatly constipated, accompanied with hæmorrhoids, not bleeding; never had them before or since (by three provings). Passages small, dark brown; look burned. Feels weak, nervous, uneasy, is apprehensive that some dire calamity is about to occur. Pain and bearing down in

the right side. Leucorrhœa; menses appear for the first time in over a year since the birth of last child; color purple and scanty, with great pain. Feels very weak, as a person feels after a severe illness. Unable to make exertion; the least exercise causes perspiration. Slowness of the pulse, decreased in ten hours from 72 to 58 per minute. All the symptoms were in the afternoon.

Remarks.—This remedy warrants the belief that it will become one of our most useful polychrests. It will be observed that it affects the brain and the nervous system, the mucous membrane of the throat and bronchi, the liver and portal circulation, and also the female reproductive organs.

Of its clinical effects my knowledge is, to some extent, limited. In one case of dry asthma, in a lady, it has acted well, giving prompt relief in several paroxysms.

In chronic follicular pharyngitis, I have used it in several cases with very satisfactory results. It has never failed to relieve the dryness of the pharynx and burning of the epiglottis, which is a characteristic symptom of the remedy.

It has repeatedly removed the inflammation of the mucous follicles even when sufficiently numerous to give the membrane "a granular or mammillated appearance."

In a case where there was frequent inclination to clear the throat by hawking, the patient unable to sing much without coughing, the pharyngeal membrane inflamed, with swelling and redness of the mucous follicles, it was cured in two months with the tenth potency, a dose every four hours.

In closing, allow me to commend it to your consideration, with the hope that at no distant day a more extended proving may be made of it, and that in its clinical application it may not, as I firmly believe it *will not*, disappoint you.

The same party reports the following cases:

CASE I.—Dry asthma in a lady; acted well, giving prompt relief in several paroxysms.

CASE II.—Chronic follicular pharyngitis, the characteristic symptom of which was a *dryness of the pharynx and burning of the epiglottis*, which was always relieved.

CASE III.—A Mr. G. had been troubled for years with his throat, which had been, in the course of treatment, cauterized with Nitrate of silver, but without benefit. The following were the symptoms: Frequent hawking to clear the throat; inclined to get hoarse from talking or singing; the throat hot and dry; the mucous membrane of fauces, uvula, and pharynx dark red, the follicles enlarged. He took Weythia 10^x every four hours, for two weeks, and reported great benefit.

During a severe epidemic influenza in the winter of 1879, I (Hale) used the Weythia very successfully in its treatment. Its only rival was *Arum dracontium*.

XANTHOXYLUM.

This medicine is prepared—or should be—from equal parts of the berries and bark of the Prickly ash.

It has been alternately praised and depreciated by physicians of all schools. It is a powerful remedy and will some time find its true place in homœopathic therapeutics. I gave the following history of it in the second edition of "New Remedies:"

Rafinesque seems to have been the first physician who investigated its qualities. He says: "This is a great article in the materia medica of our Indians; it is called *Hantola* by our Western tribes; they prefer the bark of the root and use it in decoction for colics, gonorrhœa, syphilis, rheumatism, inward pains, toothache, ulcers, etc. It is a great topical stimulant, changing the nature of malignant ulcers."

Rafinesque seems to have had a correct idea of its general powers. He says: "The Xanthoxylin, which was discovered by Dr. Staples, is crystallizable and resembles *Piperin*. This article appears to be equivalent to *Mezereum* and *Guaiacum* in properties. The acrimony is not felt at first but unfolds itself gradually by a burning sensation on the tongue and palate." He estimates it very highly in chronic rheumatism.

King does not add much to the above except to narrate its usefulness in cholera. He decrees the *bark* to be "stimulant, tonic, alterative, and sialagogue." The berries, he says, are "stimulant, carminative, and antispasmodic, acting especially on mucous tissues."

Paine says of the *Xanthoxylin:* "It is one of the most active diffusible stimulants known to the profession, when administered in doses of from one to two grains. In the healthy person it produces *a warm glow through the entire system, and a slight tickling* (tingling?) *sensation of the nerves, as though gentle shocks of electricity were passing through the body.*"

From all that I can learn of the effects of the bark and berries, in health and disease, I am inclined to consider the analogues named in Vol. I have a close similarity in action to the former; while Camphor seems very closely analogous to the latter portion of the plant. The Xanthoxylum was first introduced into homœopathic practice by Dr. Charles Cullis, of Boston, who brought it to the notice of our school in a Report of the Committee on Materia Medica of the Massachusetts Medical Society, and contributed to the first edition of this work. He presented six provings, three of which were made on women.

Its action on the general system is similar to Ammonia. The following symptoms show that it acts on the *nervous system:* Prickling sensation in the nerves; gentle shocks, like electricity, pouring through the whole body; a feeling of numbness through the whole left side of the body from head to foot. It appears to irri-

tate and stimulate the *nerves of sensation*, as witness the prickling and tingling sensation, felt not only in the mouth, but all through the body, after its administration. On the *nerves of motion* it probably acts in the same manner, namely, irritating and exciting by its primary action, and benumbing or rendering torpid by its secondary effects.

While it would be indicated by its primary action in neuralgia, and other painful affections of the nerves of sensation, and in spasms and abnormal action of the nerves of motion, it would be secondarily indicated in paralysis or torpor of both.

Dr. Paine records that he has used it very successfully in many cases of *paralysis*. He also cured one case of *hemiplegia* by the use of small doses of Strychnine and Xanthoxylin, in the proportion of one grain of the latter to one-sixteenth of a grain of the former, four times a day. The patient had previously taken Strychnine without any effect, but by adding this remedy it soon manifested its power.

It primarily stimulates the *muscular system* through its exciting action on the nerves.

On the *mucous membranes* it acts directly by its topical effects, and also through the nervous system. The berries seem to have a peculiar affinity for this membrane.

It excites the *glandular system* by its irritant action in the same manner as its analogues above mentioned. It may be found useful when the glands of excretion are irritated and pour out undue quantities of their peculiar secretions; or, when glands become torpid and fail to do their duty. To both these opposite states this medicine is homœopathic.

I am of the opinion that this medicine will be found useful in the lowest attenuations in torpid conditions of the nervous system, with a sluggish circulation. It will act well in alternation with the hypophosphites in such conditions.

It has been used in sudden faintings and collapse in large doses, but I think we have better remedies. Its action on the heart has not been investigated.

No allopathic or eclectic authority, except Professor Paine, mentions the use of this medicine in *fevers*. Paine says he has used the Xanthoxylin in the low stage of *typhus* and *typhoid* fevers, espe-

cially when there was periodicity. He says it stimulates the torpid functions to activity, and enables absorption and assimilation to be carried on. He does not, evidently, suppose the drug has any direct curative action.

This may or may not be the case. I am inclined to the opinion, however, that had we a full pathogenesis, we should find this drug homœopathic to some forms of *nervous* and *typhoid* fevers, and perhaps in the latter stages of some of the febrile exanthemata.

"In exanthematous fevers," says Paine, "especially diphtheria and malignant scarlatina, I have used the Xanthoxylin, combined with Macrotin, to produce a reaction, and transfer the disease to the cutaneous surface, with most happy effect."

Had the *combination* not been made, this observation would have been of considerable value. However, from what we know of Xanthoxylum, we may believe it to exert the same beneficial influence in these diseases as does sometimes the Ammonium carbonicum, of which it is a close analogue.

In *typhoid fever* the tincture of the berries would be indicated in about the same conditions as Ammonium carb. or Terebinthina. It is recommended by King in "tympanitic distension of the bowels during peritoneal inflammation, used internally and as an injection." Turpentine is indicated, and is a specific remedy in the same condition, but the pathological state curable by Xanthoxylum is not as formidable as that amenable to Turpentine. The former will probably cure the intestinal ulceration which attends the tympanites of typhus, although it might alleviate the distension by restoring the contractility of the paralyzed muscular coats of the intestines.

One of the most important of all the effects of Xanthoxylum is, doubtless, its action on the mucous and muscular tissues of the intestines.

The tincture of the berries appears to be the most useful preparation in the treatment of intestinal disorders. Eclectic authorities are unanimous in asserting its usefulness in *spasms of the bowels, flatulency, diarrhœa, and tympanitic distension during enteritis.*

The few symptoms recorded seem to point towards such an action. If heroic provings were instituted, it would doubtless be

found that this drug would cause those abnormal conditions which it is said to cure.

The most important clinical fact relative to the use of this medicine is its efficacy in *cholera*. Sufficient testimony is recorded to warrant us in admitting its usefulness in that terrible disease.

In *Asiatic cholera*, says King, it was extensively used by many of the physicians in Cincinnati, and with great success; it acted like electricity, so sudden was its influence over the system; indeed, many patients likened it to an electric shock, which seemed to diffuse itself through the whole frame. We gave it (the tincture of the berries) in teaspoonful doses, slightly diluted, and repeated according to circumstances, every five, ten, or fifteen minutes, with an injection (of one-half fluid ounce tincture; Laudanum twenty drops), which was given immediately after each discharge from the bowels, and retained by the patient as long as possible.

This would be good testimony in favor of the real efficacy of the Xanthoxylum, if it had not been absurdly combined, in the injection, with Laudanum. The eclectics cannot rid themselves of the allopathic notion of combination. In the allopathic treatment of cholera, Laudanum is always mixed with Camphor, although the two are antidotes, and notwithstanding the fact, so notorious now, that the use of Opium in any form increases the mortality of cholera patients.

Perhaps, in consideration of this fact, we ought to credit the Xanthoxylum with powerful curative effects, inasmuch as it acted favorably, notwithstanding its union with a drug so useless and injurious as Laudanum. It is my conviction that the Xanthoxylum acts in cholera in a manner quite similar to Camphor and Veratrum album. It seems to possess some of the properties of both, and many of its symptoms resemble those of each drug, as witness the "*tingling and electric-like shocks*, which resemble those of Veratrum album, and the peculiar nervous stimulation resembling that of Camphor.

Dr. Morrow (eclectic) used the medicine alone, with very good success, in *cholerine* cases in Cincinnati, in 1849.

In the treatment of *dysentery*, it is valued very highly by eclectics, who use it internally and by enema, after the acute inflammatory stage has subsided; also for the tympanites which sometimes occurs. Dr. P. H. Hale made use of it in a severe epidemic of dysentery which devastated Michigan in 1866. After Aconite

and Mercurius corrosivus had controlled the first stage, there occurred a condition which no remedy seemed to relieve. The symptoms were intense *spasmodic tenesmus, intestinal spasms*, tympanites, failure of strength, nervous prostration, jactitation, numbness, and sometimes symptoms indicating collapse of the vital forces. For these symptoms the Xanthoxylum was prescribed. The tincture of the berries was given in two, three, or five drop doses, every hour or two, sometimes oftener, and a weak infusion of the berries (one drachm to one quart of water), used as an enema, a few fluid ounces thrown up the rectum after each discharge from the bowels. This treatment was very successful, and succeeded in relieving cases which could not be relieved by any other.

Xanthoxylum appears to have an affinity for the sexual organs of women.

Dr. Cullis, of Boston, reported the two following provings made by women:

(1.) Mrs. H., aged thirty. Took ten drops of the tincture at 9.20 P.M.; pulse 80. Soon after taking it, began to experience a feeling of depression and weakness; weakness of the lower limbs, with pain in the knees. At 8.30 P.M., pulse 74, soft; slight nausea, with sense of oppression at the stomach; nausea increased, as did the pains of the extremities, accompanied with frequent chills. Next evening the same prover took twenty drops of the tincture; did not experience the feeling of depression in so great degree as the night before; the weakness of the limbs and pain in the knees about the same; some pain in the left side; *menses appeared next morning, being one week before the usual time;* was attended with *a good deal of pain.*

(2.) Mrs. J., aged twenty-eight, light complexion, sanguine temperament, good health. Took twenty drops of the tincture at 8 o'clock P.M. In about twenty minutes noticed a tightening of the scalp, and heavy pains in the temples, with a twitching in the left knee and trembling in the right. On the following day, took at 11 o'clock A.M., twenty drops; felt the same feelings in the head; did not notice the lower limbs. 2 o'clock P.M., took twenty-two drops; felt the same headache, or severe pain and tightening. 3 o'clock P.M., took twenty-five drops; increase of head difficulties, with a great heat and a quiet flowing (menstrual), being two days in advance of proper time. 8 o'clock P.M., took twenty drops; some headache; all the system quiet, with an unnatural forcing of nature; went to sleep as usual, and awoke *in dreadful distress and pain*, baffling description; profuse flowing; the pain, or agony, continued until noon of the next day, when it gradually subsided.

These provings prompted him to prescribe the Xanthoxylum

in cases of dysmenorrhœa, and he afterwards published the results. He says:

Clinically, I have used this remedy in *dysmenorrhœa and amenorrhœa* with marked success. One or two cases will serve for an illustration.

Miss A., aged twenty-five, brunette, has suffered from menstrual irregularities since their first appearance; the catamenia appearing in three, four, or five months, and at that time her sufferings were excruciating. Her general health otherwise was good. At the time of consulting me she had not had her catamenia for two months. I gave her Xanthoxylum, 1st dilution, five drops three times a day. In three days her menses appeared, and, much to her joy, with little pain.

Miss B., light-complexioned, nervous temperament, aged twenty-five, consulted me for suppression of the menses, caused by getting the feet wet, she being then about one week past her time. I gave her Xanthoxylum, 1st decimal, five drops every three hours. Her menses appeared the next day.

Mrs. C., aged thirty-two, mother of ten children, a large, fleshy woman, had not menstruated for five months, and previous to that time had not for three or four months. Gave Xanthoxylum 1st, to be taken three times a day. Menses appeared in four days.

In *dysmenorrhœa*, I have used this drug with very satisfactory results. I will quote one marked case:

Mrs. D., aged twenty-six, spare habit, scrofulous diathesis, had suffered for years from dysmenorrhœa. Her sufferings were so great that she would be confined to her bed for two or three days. She had tried all sorts of treatment, but without any relief. She came under my care, saying the only way she could live through her menstrual period was to drink whiskey or gin until she was intoxicated. For several months I treated her with the usual remedies, but without any beneficial result. I then gave her Xanthoxylum, 3d decimal; this completely cured her. She was extravagant in her praises of this remedy. It has never failed to relieve her.

I think Xanthoxylum more especially indicated in females of spare habit, nervous temperament, and delicate organization. In some cases of plethoric habit it has never failed me. In *leucorrhœa* with amenorrhœa, it has proved very successful. In after-pains in obstetric practice, I have found it of inestimable value; also in profuse flowing and threatened abortion.

Within a few years, and since the above was written, several physicians, especially Dr. Williams, of Joliet, claim to have used it with almost marvellous effect in dysmenorrhœa; others, physicians of close observation, have carefully followed the dose and repetition recommended by Williams, and failed to cure.

This failure in the hands of some, and success in others, cannot be accounted for, except on the theory that it was not affiliated properly. It appears to me that Xanthoxylum is only indicated

in dysmenorrhœa where the *neuralgic element predominates.* It is well known that what one physician considers congestive another would consider neuralgic.

Again, it is well known that a remedy which will relieve a neuralgia at one time will fail at another. Unless a medicine corresponds to the primary *cause* of a neuralgia, it is only a palliative.

I have often relieved a neuralgic dysmenorrhœa *completely* with Xanthoxylum, Viburnum, or Iodoform, and there would be perfect immunity from pain, for *three periods*, under the use of the remedy. But, very strangely, at the *fourth* period the old sufferings would come back! I would have to select some other remedy and would meet with the same results. I have known similar alleviations to occur from change of climate. Some women always have dysmenorrhœa while they remain in Chicago, but are free from suffering when in New York or Boston. Others I have known whose experience is just the reverse.

In Volume I will be found a brief narration of several cases of amenorrhœa of long standing, cured by the use of the 1ˣ. They were all *chlorotic*, and suffered with *ovarian pains.* I have cured several presenting similar symptoms. Other physicians report adversely of its curative power in such cases. (I prefer the tincture of the berries.)

Dr. Massey, of England, has perhaps hit upon a keynote for its use. He says it is indicated in dysmenorrhœa, when *severe pains follow the course of the crural nerve.*

I would advise it in *sciatica* and *crural neuralgia*, and also *rheumatalgia*, when occurring in patients having a sluggish circulation.

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